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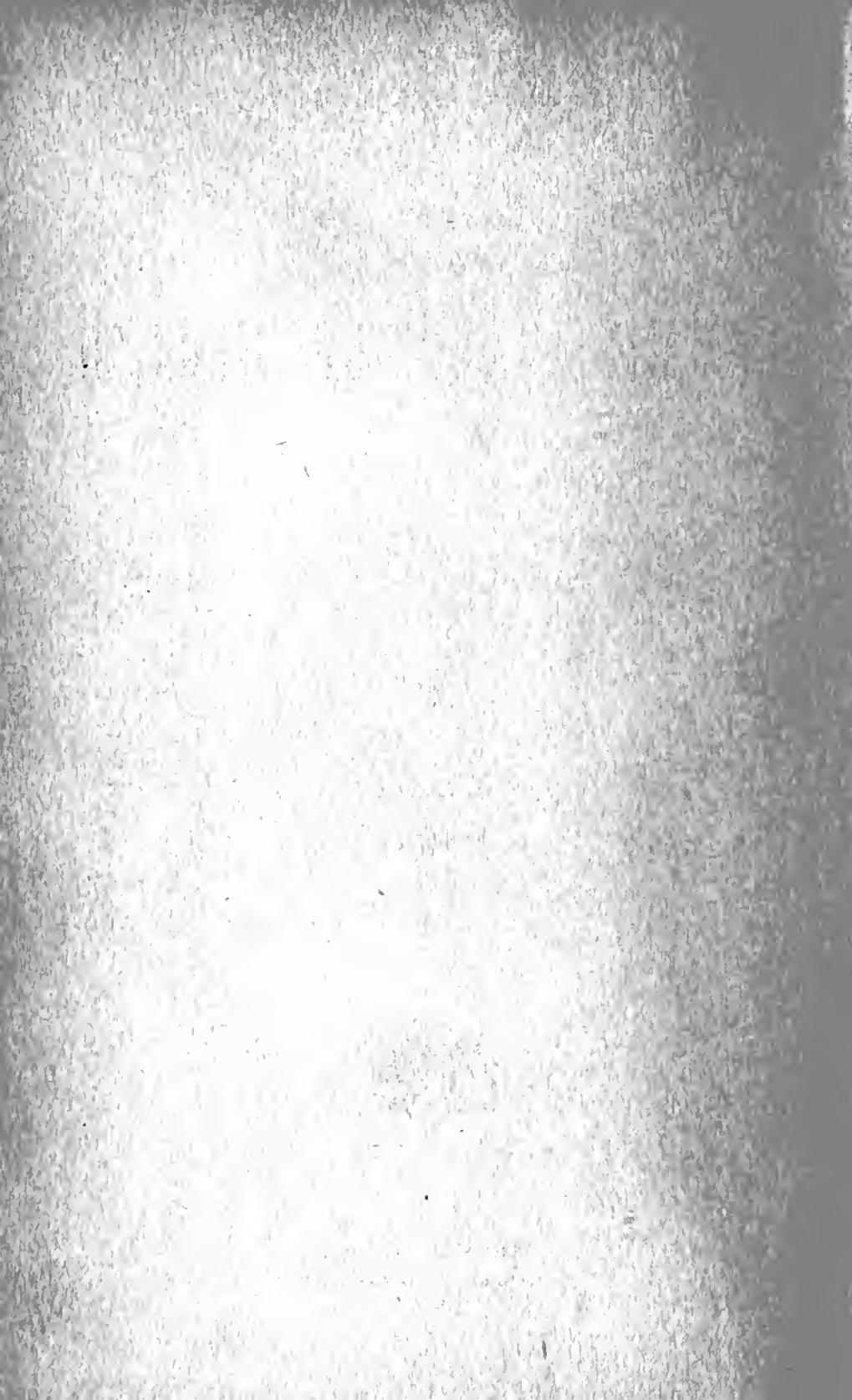
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THE SIXTH ANNUAL REPORT

OF THE

COMMISSIONER OF HEALTH

OF THE

COMMONWEALTH OF PENNSYLVANIA

1911

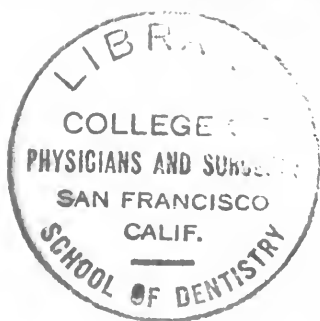
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LETTER OF TRANSMITTAL

Commonwealth of Pennsylvania,
Department of Health,
State Capitol, Harrisburg,
February 1, 1912.

To His Excellency, John K. Tener, Governor of Pennsylvania:

Sir:—In compliance with the requirements of Section 13 of the Act of Assembly "creating a Department of Health and defining its duties and powers," approved the 27th day of April A. D. 1905, I have the honor to transmit my sixth annual report upon the "vital statistics and sanitary conditions of the State" for the year ending December 31, 1911, including the operations of the Department of Health under its several Divisions, namely:—Statistics (Vital and Morbidity), Inspection (Medical and Sanitary), Sanitary Engineering, Laboratories and Experimental Stations, Control of Tuberculosis, (including three Sanatoria and one hundred and fifteen dispensaries), the extraordinary emergency incident to the catastrophe occasioned by the bursting of a dam in Austin, Potter County, and Hygienic Education; work done in *ex officio* positions, namely, the State Water Commission, the State Quarantine Board, the Bureau of Medical Examination and Licensure, and the Dental Council being reported by said bodies respectively.

SAMUEL G. DIXON,
Commissioner of Health.

DEPARTMENT OF HEALTH
OF THE
COMMONWEALTH OF PENNSYLVANIA
1911.

Commissioner:—Samuel G. Dixon, M. D., LL. D.

Advisory Board:—Charles B. Penrose, M. D.

Adolph Koenig, M. D.

B. H. Warren, M. D.

Lee Masterton, C. E.

George W. Guthrie, M. D.

Clarence J. Marshall, V. M. D.

SIXTH ANNUAL REPORT
OF THE
Commissioner of Health
OF THE
COMMONWEALTH OF PENNSYLVANIA

To His Excellency, John K. Tener, Governor.

Sir:—In offering my Sixth Annual Report as Commissioner of Health of this Commonwealth, I desire to take occasion to express my appreciation of the honor conferred upon me by Your Excellency in reappointing me to this responsible position. I assume that I may consider your action in the nature of an expression of your approval of the manner in which I have discharged the functions of this important office during the more than five years of my incumbency. That I should have received the seal of approbation from three successive occupants of the gubernatorial chair is indeed gratifying and will be a stimulus to even more devoted attention to these weighty duties in the future, in the hope of adding lustre to your administration by establishing a still higher standard of Public Health administration in our beloved State.

ORGANIZATION.

During the year 1911 the following changes took place in the personnel of the Department.

Mr. Wilbur Morse having tendered his resignation of the position of Secretary to the Commissioner, the same was filled by the appointment of Mr. Harry Lindley Hosford, of Philadelphia.

Dr. S. H. Gilliland having ceased to be the State Veterinarian, his place was filled by the appointment, by your Excellency, of Clarence J. Marshall, V. M. D., of Philadelphia, who thus became *ex officio* a member of the Advisory Board of this Department.

Dr. John A. Bouse, of Chambersburg, a graduate of Gettysburg College and the University of Pennsylvania, Special Medical Inspector, who had been doing valuable service in keeping up the organization and stimulating the work of the local Boards of Health throughout the State, also as a lecturer in connection with the travel-

ing Tuberculosis Exhibition of the Department, terminated his useful career by death after an illness of a few weeks at Harrisburg on March 25th of the present year. His duties in connection with the Exhibit have been filled in part by Dr. T. H. A. Stites and in part by members of the staff of Medical Inspection. The vacancy was finally filled by the appointment of Dr. William C. Miller, Bedford County, a graduate of Lafayette College and of the University of Virginia and the University Medical College of New York City; a member of the State Legislature, session 1899 and 1901, and twice elected to the State Senate, on May 15, 1911, as Lecturer and Manager of the Tuberculosis Exhibit of the Pennsylvania State Department of Health.

ORGANIZATION.

As required by law I hereby furnish a list of the officers and agents of the Department and the names thereof.

STATE CAPITOL, HARRISBURG.

Commissioner of Health, Samuel G. Dixon, M. D., LL. D.,
Montgomery County

GENERAL DIVISION.

Assistant to Commissioner, Benjamin Lee, M. D., Ph. D., Philadelphia.

Secretary, *Wilbur Morse, Ardmore, Montgomery County.

Harry Lindley Hosford, Philadelphia.

Auditor, Miss Ivy E. Huber, Harrisburg, Dauphin County.

General Inspector, Charles W. Webbert, Boiling Springs, Cumberland County.

Landscape Architect, Miss Elizabeth Leighton Lee, Philadelphia.

Stenographer, Miss Edna Hosler, Carlisle, Cumberland County.

Messenger, Edward F. Eisely, Harrisburg, Dauphin County.

Night Clerk, Roy G. Miller, New Kingston, Cumberland County.

Multigraph Operator, R. K. Styer, Perkiomenville, Montgomery County.

Janitor, John B. Sample, Harrisburg, Dauphin County.

MEDICAL DIVISION.

Chief Medical Inspector, B. Franklin Royer, M. D.,
Philadelphia.

Associate Chief Medical Inspector, C. J. Hunt, M. D., Philadelphia.

Stenographers—Miss Fannie A. Houseknecht, Muncy, Lycoming County.

Mrs. Nell Dalzell Buch, Reading, Berks County.

Mrs. Mabel Miller, Harrisburg, Dauphin County.

Miss Emma Leib, Harrisburg, Dauphin County.

*Miss Maude Ferris, Waterbury, Erie County.

Clerks—Miss Harriet Mae Morley, Marysville, Perry County.

Mrs. Rosa Van Horn, Harrisburg, Dauphin County.

Miss Maude Van Ormer, Harrisburg, Dauphin County.

Miss Mary Weigle, Harrisburg, Dauphin County.

Miss Margaret Pomeroy, Harrisburg, Dauphin County.

Miss Katherine L. Hood, Duncannon, Perry County.

Miss Aida Beauter, Wellsboro, Tioga County.

Miss Olga V. Booker, Harrisburg, Dauphin County.

Miss Bess Fairbanks, McGees Mills, Clearfield County.

Miss Irene McCalley, Harrisburg, Dauphin County.

Miss Florence Eckert, Lancaster, Lancaster County.

Miss M. Emilie Patterson, York, York County.

Miss Esther Shaub, Lancaster, Lancaster County.

COUNTY MEDICAL INSPECTORS.

County.	Name.	Post Office.
Adams,	Dr. John R. Dickson,	Gettysburg.
Allegheny,	Dr. S. M. Rinehart,	Pittsburgh, N. S.
Armstrong,	Dr. T. N. McKee,	Kittanning.
Beaver,	Dr. Bruce Snodgrass,	Beaver Falls.
Bedford,	Dr. W. de la M. Hill,	Beckett.
Berks,	Dr. Israel Cleaver,	Reading.
Blair,	Dr. J. D. Findley,	Altoona.
Bradford,	*Dr. S. M. Woodburn,	Towanda.
Bucks,	Dr. T. Ben Johnson, Jr.,	Towanda.
Butler,	Dr. I. S. Plymire,	Doylestown.
Cambria,	Dr. H. D. Hockenberry,	West Sunbury.
Cameron,	Dr. Wm. E. Matthews,	Johnstown.
Carbon,	Dr. H. S. Falk,	Emporium.
Centre,	Dr. E. G. Bray,	Mauch Chunk.
Chester,	*Dr. Geo. F. Harris,	Bellefonte.
Clarion,	Dr. Jos. Scattergood,	West Chester.
Clearfield,	Dr. J. T. Rimer,	Clarion.
Clinton,	Dr. S. O. Stewart,	Clearfield.
Columbia,	Dr. R. B. Watson,	Lock Haven.
Crawford,	Dr. S. B. Arment,	Bloomsburg.
Cumberland,	Dr. J. K. Roberts,	Mendville.
Dauphin,	Dr. Harvey B. Basbore,	West Fairview.
Delaware,	Dr. P. A. Hartman,	Harrisburg.
Elk,	Dr. H. M. Hiller,	Chester.
Erie,	Dr. J. G. Flynn,	Ridgway.
Fayette,	Dr. J. W. Wright,	Erie.
Forest,	Dr. O. R. Altman,	Uniontown.
Franklin,	Dr. F. J. Boyard,	Tionesta.
Fulton,	Dr. H. X. Bonbrake,	Chambersburg.
Greene,	Dr. J. W. Mosser,	McConnellsburg.
Huntingdon,	Dr. J. T. Iams,	Waynesburg.
Indiana,	Dr. H. C. Frantz,	Huntingdon.
Jefferson,	Dr. W. A. Simpson,	Indiana.
Juniata,	*Dr. John E. Grube,	Punxsutawney.
Lackawanna,	Dr. S. Meigs Beyer,	Punxsutawney.
Lancaster,	Dr. W. H. Banks,	Mifflintown.
Lawrence,	Dr. J. C. Reifsnnyder,	Scranton.
Lebanon,	Dr. J. L. Mowery,	Lancaster.
Lehigh,	Dr. J. D. Moore,	New Castle.
Luzerne,	Dr. A. J. Reigel,	Lebanon.
Lycoming,	Dr. Morris F. Cawley,	Allentown.
McKean,	Dr. Charles H. Miner,	Wilkes-Barre.
Mercer,	Dr. C. W. Youngman,	Williamsport.
Mifflin,	Dr. W. C. Hogan,	Bradford.
Monroe,	Dr. P. P. Fisher,	Sharon.
Montgomery,	Dr. C. H. Brisbin,	Lewistown.
Montour,	Dr. W. L. Angle,	East Stroudsburg.
Northampton,	Dr. H. H. Whitcomb,	Norristown.
Northumberland,	Dr. G. A. Stock,	Danville.
Perry,	Dr. E. M. Green,	Easton.
Pike,	Dr. R. H. Simmons,	Shamokin.
Potter,	Dr. A. R. Johnston,	New Bloomfield.
Schuylkill,	Dr. W. B. Kenworthy,	Milford.
Snyder,	Dr. E. H. Ashcraft,	Coudersport.
Somerset,	Dr. L. T. Kennedy,	Pottsville.
Sullivan,	Dr. F. J. Wagenseller,	Selinsgrove.
Susquehanna,	Dr. Charles P. Large,	Meyersdale.
Tioga,	Dr. J. L. Christian,	Lopez.
Union,	Dr. H. B. Lathrop,	Springville.
Venango,	Dr. S. P. Hakes,	Tioga.
Warren,	Dr. C. H. Dimm,	Mifflinburg.
Washington,	Dr. J. P. Strayer,	Oil City.
Wayne,	*Dr. M. V. Ball,	Warren.
Westmoreland,	Dr. C. W. Schmehl,	Warren.
Wyoming,	Dr. C. B. Wood,	Monongahela.
York,	Dr. H. B. Ely,	Honesdale.
	Dr. I. M. Fortser,	Greensburg.
	Dr. H. L. McKown,	Tunkhannock.
	Dr. J. S. Miller,	York.

TOWNSHIP HEALTH OFFICERS.

Health Officer.	Residence.	County.
J. J. Kohl,	Orrtanna,	Adams.
Chas. Adelsperger,	Aspers, R. D. No. 2,	Adams.
John H. Delp,	York Springs, No. 1,	Adams.
Absalom M. Dittmar,	East Berlin,	Adams.
Aaron Kinneman,	Abbottstown,	Adams.
D. C. Krise,	McSherrystown,	Adams.
T. O. Gonker,	Littlestown,	Adams.
*Harry Weaver,	Gettysburg,	Adams.
C. B. Hoffman,	Gettysburg,	Adams.
J. H. Pecher,	Fairfield,	Adams.
J. H. Rath,	Gallatin,	Allegheny.
*Stephen Jones,	Boston,	Allegheny.
W. P. Andre,	Elizabeth,	Allegheny.
C. V. Keefer,	Pitcairn,	Allegheny.
*Elmer H. Taylor,	Haffey,	Allegheny.
*E. E. Patterson,	Elizabeth,	Allegheny.
Isaac Lamont,	Unity Station, No. 1,	Allegheny.
A. E. Hendershot,	W. Elizabeth,	Allegheny.
John Jones,	Mt. Oliver,	Allegheny.
J. M. Edmundson,	Carnegie,	Allegheny.
J. R. McMichael,	Oakdale,	Allegheny.
John Yoltan,	Cliff Mine,	Allegheny.
M. C. Schubert,	McKees Rocks,	Allegheny.
*R. B. Pagan,	Haysville,	Allegheny.
C. M. Timblin,	Bridgeville,	Allegheny.
J. H. D. Gray,	Sewickley, No. 2,	Allegheny.
*Geo. McCandless,	Bellevue,	Allegheny.
Richard Pitterington,	Clairton,	Allegheny.
*Karl Schneider,	Sharpsburg,	Allegheny.
Stephens Yerkins,	Sharpsburg,	Allegheny.
J. C. Dunn,	Tarentum,	Allegheny.
Geo. W. Bell,	Sharpsburg, No. 2,	Allegheny.
G. C. Magill,	Harmarville, No. 1,	Allegheny.
Geo. Fisher,	Bakerstown,	Allegheny.
C. H. Kretzer,	Allison Park,	Allegheny.
Emil Lifvergreen,	Braddock,	Allegheny.
F. L. Fonger,	Pittsburgh, No. 5,	Allegheny.
*A. H. Semmens,	Kittanning,	Armstrong.
*Alex. Foster,	Kittanning,	Armstrong.
Will A. Wray,	Spring Church,	Armstrong.
J. E. Kinnard,	Cochran Mills,	Armstrong.
J. C. Moore,	Rural Valley,	Armstrong.
Frank Sanders (Clarion Co.),	New Bethlehem,	Armstrong.
W. A. Jack,	Kittanning, R. D. No. 5,	Armstrong.
S. H. McNaughton,	Parkers Landing,	Armstrong.
J. A. Foreman,	Dayton,	Armstrong.
W. H. Eynon,	Kaylor,	Armstrong.
W. E. Paine,	Tidal,	Armstrong.
D. E. Wolf,	Kelly Station,	Armstrong.
I. H. Laird,	New Sheffield,	Beaver.
*R. W. McElhaley,	Murdockville (Wash. Co.),	Beaver.
Dr. W. M. Miller,	Hookstown,	Beaver.
Albert Marx,	Industry,	Beaver.
G. H. Young,	Darlington,	Beaver.
Hiram McKee,	Beaver Falls,	Beaver.
J. Lewis,	New Brighton,	Beaver.
*K. R. Wagner,	Ambridge,	Beaver.
C. A. See,	Economy,	Beaver.
J. Lowery,	Hyndman,	Bedford.
Dr. E. L. Smith,	Schellburg,	Bedford.
W. A. McGregor,	Alum Bank,	Bedford.
Chas. Wolf,	Cessna, R. D. No. 1,	Bedford.
C. W. Bulzer,	Woodbury,	Bedford.
C. Guy Blymyer,	Bedford,	Bedford.
C. W. Thomas,	Six Mile Run,	Bedford.
Thos. Stailly,	Everett,	Bedford.
*H. C. Metzler,	Rainsburg,	Bedford.
N. C. Mearkle,	Clearville,	Bedford.
J. E. Moyer,	Geigers Mills,	Berks.
Morris Schaeffer,	Shillington,	Berks.
Dr. W. H. Seitzinger,	Wernersville,	Berks.
A. L. Kleingina,	W. Leesport, No. 1,	Berks.
W. H. Lutz,	Bernville,	Berks.
John D. Moll,	Bernville,	Berks.
*Geo. E. Schlasman,	Mt. Aetna,	Berks.
Franklin Deltzler,	Mt. Aetna,	Berks.
Morris A. Ernst,	Shoemakersville,	Berks.
D. J. Fraunfelder,	Lenhartsville,	Berks.
Mahlon Guldin,	Maxatawny,	Berks.
F. W. Balthaser,	Fleetwood,	Berks.
J. I. Henne,	Leesport,	Berks.
Morris Spatz,	Jacksnwald,	Berks.
John K. Ludwig,	Centrepot,	Berks.

TOWNSHIP HEALTH OFFICERS—Cont'd.

Health Officer.	Residence.	County.
Dr. Daniel McLean,	Douglassville, No. 1,	Berks.
W. S. Stengel,	Bally,	Berks.
*Andrew Mest,	Manatawny,	Berks.
J. W. Schwartz,	Mertztown,	Berks.
*D. M. Walters,	Tyrone,	Blair.
M. F. Brownlee,	Tyrone,	Blair.
*J. W. Jones,	Bellewood,	Blair.
Frank Garland,	Bellewood,	Blair.
T. G. Herbert,	Altoona,	Blair.
J. Frank Meutzer,	Frankstown,	Blair.
*G. W. Myers,	Duncansville,	Blair.
Sam. A. Keller,	Duncansville,	Blair.
Wm. Ickes,	Roaring Springs,	Blair.
Jos. Crissman,	Martinsburg,	Blair.
J. R. Lytle,	Williamsburg,	Blair.
Dan'l Chase,	Gillett,	Bradford.
J. M. Linderman,	Troy,	Bradford.
J. B. Entler,	Canton,	Bradford.
F. O. Lantz,	Powell,	Bradford.
T. F. Lent,	Burlington,	Bradford.
C. T. Hull,	Athens,	Bradford.
Delanson Penner,	Towanda,	Bradford.
Henry Forbes,	Sheshequin,	Bradford.
W. E. Lewis,	Wyalusing,	Bradford.
J. T. Hested,	New Albany,	Bradford.
L. M. Briuk,	LeRaysville,	Bradford.
F. M. Hicks,	Rome,	Bradford.
*H. R. Moyer,	Quakertown,	Bucks.
Cyrus Nagel,	Quakertown,	Bucks.
F. P. Kelter,	Richhill,	Bucks.
Thos. H. Blehn,	Perkasie,	Bucks.
Dr. A. F. Myers,	Blooming Glen,	Bucks.
Elmer E. Crouthamel,	Line Lexington,	Bucks.
C. D. Barrett,	Doylestown,	Bucks.
A. G. Shaw,	Upper Black Eddy,	Bucks.
Dr. Francis G. Cope,	Upper Black Eddy,	Bucks.
Geo. Milnor,	New Hope,	Bucks.
David C. Voorhees, Jr.,	Newtown,	Bucks.
E. H. Blaker,	Ivyland,	Bucks.
Henry C. Lovett,	Emilie P. O.,	Bucks.
F. B. Wist,	Yardley,	Bucks.
*H. H. Shantz,	Richland Center,	Bucks.
L. L. Brown,	Harrisville,	Butler.
*J. M. Dunn,	Slippery Rock,	Butler.
J. H. Pizzo,	Slippery Rock,	Butler.
H. C. Hindman,	West Sunbury,	Butler.
J. E. Womer,	Parkers Landing (Armst'g Co.),	Butler.
J. F. Harper,	North Washington,	Butler.
Wm. Storey,	Baldwin,	Butler.
Jos. Criswell,	Lyndora,	Butler.
W. D. Hoffman,	Saxonburg,	Butler.
Dr. Geo. H. Mathlott,	Mars,	Butler.
Dr. D. W. Fiedler,	Harmony,	Butler.
Harry Heberling,	Portersville,	Butler.
E. T. Edwards,	Johnstown,	Cambria.
Ellsworth Rowland,	Nanty Glo,	Cambria.
Frank D. Hellman,	South Fork, No. 1,	Cambria.
J. W. Fouch,	Salix,	Cambria.
*O. J. Stricker,	Portage,	Cambria.
Chas. J. Burkey,	Portage,	Cambria.
W. H. Brady,	Lilly,	Cambria.
Dr. J. A. Lynch,	Cresson,	Cambria.
J. R. Gorman,	Gallitzin,	Cambria.
D. L. Owens,	Ebensburg,	Cambria.
W. C. Perry,	Chest Spring,	Cambria.
*Hm. Hildebrand,	Dysart,	Cambria.
*H. E. Read,	Dysart,	Cambria.
Geo. W. Cole,	Dysart,	Cambria.
Robert Cowan,	St. Benedict,	Cambria.
Dr. E. T. Ealy,	Emelgh,	Cambria.
Dr. S. W. Worrell,	Patton,	Cambria.
A. C. Lovell,	Glasgow,	Cambria.
John Kline,	Nicktown,	Cambria.
H. B. Mutthersbough,	Driftwood,	Cameron.
*Frank Judd,	Emporium,	Cameron.
R. R. McQuay,	Emporium,	Cameron.
T. E. Morthimer,	Lehighton,	Carbon.
*Francis A. Seip,	Palmerton,	Carbon.
P. J. Dougherty,	Palmerton,	Carbon.
A. T. Koch,	Weissport,	Carbon.
Julius Klebe,	Mauch Chunk,	Carbon.
J. F. Cole,	Beaver Meadow,	Carbon.

TOWNSHIP HEALTH OFFICERS—Cont'd.

Health Officer.	Residence.	County.
C. J. Kistler,	Weatherly,	Carbon.
W. M. Kleckner,	E. Mauch Chunk,	Carbon.
C. H. Hofmann,	White Haven (Luz. Co.),	Carbon.
S. M. Sankey,	Phillipsburg,	Centre.
S. R. Pringle,	Port Matilda,	Centre.
*Dr. W. G. Glen,	State College,	Centre.
W. D. Port,	Pine Grove Mills,	Centre.
G. M. Cooney,	Springs Mills,	Centre.
J. S. Weaver,	Aaronsburg,	Centre.
Homer Carr,	Milesburg,	Centre.
Dr. W. J. Kurtz,	Howard,	Centre.
W. A. Sickel,	Snow Shoe,	Centre.
*Irwin Haws,	Pottstown,	Chester.
W. H. Kennedy,	Downingtown,	Chester.
Elmer Hiestand,	Spring City, R. D.,	Chester.
Ignatius DeWan,	Phoenixville,	Chester.
Warren Latshaw,	Anselma,	Chester.
Lewis Miller,	Berwyn,	Chester.
Wm. D. Garrett,	West Chester, No. 2,	Chester.
G. W. Sharpless,	West Chester,	Chester.
*W. B. Seal,	Unionville,	Chester.
S. H. Wickersham,	Unionville,	Chester.
R. I. Miller,	Avondale,	Chester.
Wm. Evans,	West Grove,	Chester.
Dr. D. A. Stubbs,	Oxford,	Chester.
W. H. Townsend,	Lincoln University,	Chester.
Wm. Hurley,	Parkesburg,	Chester.
T. E. Windle,	Coatesville,	Chester.
J. H. Essick,	St. Peters, No. 3,	Chester.
F. L. Talbot,	St. Peters,	Chester.
R. J. Sigworth,	Leeper,	Clarion.
Dr. N. M. Meals,	Callensburg,	Clarion.
Dr. S. A. Brown,	Foxburg,	Clarion.
Anson Beatty,	Knox,	Clarion.
E. W. Kiser,	Shippensburg,	Clarion.
Thos. McLaughlin,	Lucinda,	Clarion.
*Jerome W. Young,	Shippensburg,	Clarion.
A. M. Callihan,	Helen Furnace,	Clarion.
M. C. Elder,	Corsica, No. 1, (Jeff. Co.),	Clarion.
Dr. C. E. Sayers,	Hawthorn,	Clarion.
Dr. G. B. Woods,	Curtisville,	Clarion.
P. C. McEwen,	Sligo,	Clarion.
A. J. Rimer,	Rimersburg,	Clarion.
C. C. Mock,	Phillipston,	Clarion.
Dr. J. M. E. Brown,	New Bethlehem,	Clarion.
*S. E. Henlen,	Frysburg,	Clarion.
Dr. G. F. Prowell,	Burnside,	Clearfield.
*W. B. O'Dell,	Mahaffey,	Clearfield.
Dr. H. A. Woodside,	Lumber City,	Clearfield.
Dr. J. A. Miller,	Grampan,	Clearfield.
Dr. H. O. King,	Curwensville,	Clearfield.
Dr. R. R. Jordan,	DuBois,	Clearfield.
Dr. J. H. Kline,	Penfield,	Clearfield.
*W. A. Haggerty,	Clearfield,	Clearfield.
M. L. McQuown,	Clearfield,	Clearfield.
P. C. Gates,	Coalport,	Clearfield.
*Dr. Fred Todd,	Houtzdale,	Clearfield.
W. P. Harpster,	Houtzdale,	Clearfield.
F. R. Sparling,	Osceola Mills,	Clearfield.
Dr. Walter W. Senn,	Munson Station,	Clearfield.
Dr. H. G. Jones,	Kylertown,	Clearfield.
E. L. Roussey,	Frenchville,	Clearfield.
Earl Wetzel,	McHaffey,	Clearfield.
J. D. Stoughton,	Lock Haven,	Clinton.
I. T. Hunter,	Mill Hall,	Clinton.
R. A. Shaw,	Jersey Shore, No. 5,	Clinton.
C. Sebring,	Lock Haven,	Clinton.
Emanuel Esterline,	Loganton,	Clinton.
Lewis Pfoutz,	Renovo,	Clinton.
*J. Stuart Groupe,	Rauchtown,	Clinton.
Houston Weldler,	Rauchtown,	Clinton.
C. L. Hirleman,	Benton,	Columbia.
J. S. Cole,	Millville,	Columbia.
*Dr. E. L. Davis,	Berwick,	Columbia.
Dr. J. W. Mather,	Berwick,	Columbia.
Geo. P. Ringler,	Bloomsburg,	Columbia.
R. M. Graham,	Catawissa,	Columbia.

TOWNSHIP HEALTH OFFICERS—Cont'd.

Health Officer.	Residence.	County.
John A. Breisch,	Mainville,	Columbia.
Peter McHale,	Centralla,	Columbia.
Martin Billig,	Nunidia,	Columbia.
Dr. S. F. Hazen,	Hartstown,	Crawford.
*H. P. Marley,	Geneva,	Crawford.
Hayden Peterson,	Atlantic,	Crawford.
Taylor Hemphill,	Titusville,	Crawford.
A. L. Squier,	Townville,	Crawford.
W. L. Reed,	Spartansburg,	Crawford.
*Mat Merchant,	Riceville,	Crawford.
Willbur H. King,	Lincolnvile,	Crawford.
Dr. F. D. Young,	Cambridge Springs,	Crawford.
J. A. Webster,	Cambridge Springs,	Crawford.
J. W. Heard,	Blooming Valley,	Crawford.
*W. C. Farley,	Llnessville,	Crawford.
C. C. Munger,	Center Road Station,	Crawford.
Dr. H. L. Brush,	Conneaut Lake,	Crawford.
Harry A. Campfield,	Meadville,	Crawford.
W. H. Campfield,	Guys Mills,	Crawford.
W. H. Rupert,	Conneautville,	Crawford.
J. A. Reichel,	Saagertown,	Crawford.
J. T. Bressler,	Shepherdstown,	Cumberland.
I. J. Weaver,	Mechanicsburg,	Cumberland.
A. W. Yeats,	Carlisle,	Cumberland.
M. A. Embick,	Carlisle,	Cumberland.
T. A. Carothers,	Carlisle, No. 8,	Cumberland.
B. Frank Hutton,	Newville,	Cumberland.
*J. K. Mackey,	Shippensburg,	Cumberland.
J. B. Barbour,	Shippensburg,	Cumberland.
W. C. Kreamer,	Shippensburg, R. D.,	Cumberland.
C. D. Waldron,	Halifax,	Dauphin.
*Wm. Schreffler,	Millersburg,	Dauphin.
*J. W. Hartman,	Berrysburg,	Dauphin.
J. A. Kambell,	Berrysburg,	Dauphin.
Dan'l F. Coleman,	Gratz,	Dauphin.
W. C. Mills,	Millersburg,	Dauphin.
*Jacob Bast,	Williamstown,	Dauphin.
*S. S. Dewalt,	Williamstown,	Dauphin.
E. F. Steever,	Wiconisco,	Dauphin.
Thos. G. Lentz,	Elizabethville,	Dauphin.
R. M. Steckley,	Dauphin,	Dauphin.
Lee Manbeck,	Hummelstown,	Dauphin.
A. B. Croll,	Middletown,	Dauphin.
G. S. Hetrick,	Penbrook, No. 2,	Dauphin.
O. C. Bishop,	Oberlin,	Dauphin.
C. Wise,	Williamstown,	Dauphin.
L. D. Speakman,	Brandywine Summit,	Delaware.
S. A. Field,	Media,	Delaware.
*John D. Lee,	Chester,	Delaware.
Jos. Dalphey,	Chester,	Delaware.
F. P. Bogan,	Llanwellyn,	Delaware.
*J. E. Shanley,	Hallton,	Elk.
Jos. F. Metts,	Hallton,	Elk.
Geo. Younger, Sr.,	Johnsonburg,	Elk.
John F. Wegemer,	St. Marys,	Elk.
A. S. Guinac,	Ridgway,	Elk.
A. S. Horton,	Brockport,	Elk.
E. H. Morey,	Benezette,	Elk.
J. T. Long,	DeYoung,	Elk.
Henry McCray,	Corry, No. 3,	Erie.
Robt. M. Buck,	Union City,	Erie.
C. E. Fish,	Waterford,	Erie.
E. L. Dunn,	McKean,	Erie.

TOWNSHIP HEALTH OFFICERS—Cont'd.

Health Officer.	Residence.	County.
Thos. Hurst,	Albion,	Erie.
A. H. Nason,	North Girard,	Erie.
J. E. Burton,	Buffalo Road, Erie,	Erie.
Lewis Ward,	North East,	Erie.
Frank Costello,	Guyaux,	Fayette.
*Geo. Jacobs,	McClellandtown,	Fayette.
A. M. Provance,	Hopwood,	Fayette.
Howard Garee,	Grindstone,	Fayette.
Allen Hyatt,	Connellsville,	Fayette.
Arthur C. Dunn,	Vanderbilt,	Fayette.
N. E. Hall,	Normalville,	Fayette.
*Dr. Homer H. Lewis,	Ohio pyle,	Fayette.
*Michael Rafter,	Ohio pyle,	Fayette.
W. G. Corristan,	Ohio pyle,	Fayette.
Jos. H. Humberston,	Humberston,	Fayette.
M. J. Weller,	Farmington,	Fayette.
John M. Crow,	McClellandtown,	Fayette.
Carlisle A. Sharp,	Perryopolis,	Fayette.
Wm. Hood, Sr.,	Tionesta,	Forest.
Guy Van Horn,	Clarington,	Forest.
H. F. Hummelbaugh,	Mercersburg,	Franklin.
C. Fred Fletcher,	Greencastle,	Franklin.
*H. F. Rouston,	Waynesboro,	Franklin.
Percy H. Snowberger,	Waynesboro,	Franklin.
W. E. Flaney,	Chambersburg,	Franklin.
*H. K. Leberknight,	Orrstown,	Franklin.
W. I. Shearer,	Orrstown,	Franklin.
W. H. Markey,	Fannettsburg,	Franklin.
*M. F. Black,	McConnellsburg,	Fulton.
C. E. Seville,	McConnellsburg,	Fulton.
Harry L. Peck,	Needmore,	Fulton.
J. V. Deaver,	Hiram,	Fulton.
M. E. Barton,	Crystal Spring,	Fulton.
J. Edgar Bailly,	Carmichaels,	Greene.
Robt. E. Donham,	Greensboro,	Greene.
Dr. G. W. Hatfield,	Mt. Morris,	Greene.
Dr. Chas. Spragg,	Waynesburg,	Greene.
Dr. S. A. Hoge,	Rices Landing,	Greene.
*Dr. E. G. Braddock,	Harveys,	Greene.
J. M. Murray,	Aleppo,	Greene.
*Dr. H. C. Rice,	New Freeport,	Greene.
John L. Rice,	New Freeport,	Greene.
*S. H. Price,	Shade Gap,	Huntingdon.
W. T. Bair,	Shade Gap,	Huntingdon.
W. H. Abbott,	Three Springs, R. D.,	Huntingdon.
J. M. Lutz,	Shirleysburg,	Huntingdon.
R. P. Smith,	Mapleton,	Huntingdon.
Dr. J. G. Spangler,	Mapleton,	Huntingdon.
*A. P. Simpson,	Mill Creek,	Huntingdon.
Dr. Geo. A. Simpson,	Mill Creek,	Huntingdon.
Scott Houck,	Dudley,	Huntingdon.
D. B. Querry,	Entrioken,	Huntingdon.
A. P. McElwain,	Huntingdon, R. D.,	Huntingdon.
I. C. Temple,	Petersburg,	Huntingdon.
*W. H. Lehman,	Warriors Mark,	Huntingdon.
J. R. Lehman,	Warriors Mark,	Huntingdon.
J. E. Irvin,	McAleys Fort,	Huntingdon.
David Kyle,	Charter Oak,	Huntingdon.
*W. B. Walb,	Grafton,	Huntingdon.
H. R. Householder,	Grafton,	Huntingdon.
F. L. Balfour,	Rossiter,	Indiana.
Adam Black,	Smicksburg,	Indiana.
W. S. Brown,	Marion Centre,	Indiana.

TOWNSHIP HEALTH OFFICERS—Cont'd.

Health Officer.	Residence.	County.
Henry Barkey,	Glen Campbell,	Indiana.
Dr. J. H. Peterman,	Cherrytree,	Indiana.
W. A. Lingenfelter,	Indiana, No. 1,	Indiana.
J. W. Thompson,	Indiana,	Indiana.
Jas. Kinter,	Shelocta, No. 1,	Indiana.
Dr. W. L. Shields,	Kent,	Indiana.
Calvin Miller,	Saltsburg, No. 1,	Indiana.
Dr. E. M. Bushnell,	Black Lick,	Indiana.
J. F. Fox,	Homer City,	Indiana.
W. C. Cunningham,	Brush Valley P. O.,	Indiana.
Dr. R. M. Alexander,	Robinson,	Indiana.
Frank C. Amond,	Clymer,	Indiana.
Dr. J. C. Gourley,	Heilwood,	Indiana.
R. N. Calboun,	Big Run,	Jefferson.
*H. F. Sprankle,	Punxsutawney,	Jefferson.
M. I. Kunselman,	Coolspring,	Jefferson.
Alfred Frampton,	Punxsutawney,	Jefferson.
Sam'l. Shilling,	Ringgold,	Jefferson.
I. B. McLaughlin,	Summerville,	Jefferson.
Jas. W. Kyle,	Corsica,	Jefferson.
W. D. Steele,	Sigel,	Jefferson.
Dr. J. G. Steiner,	Knoxdale,	Jefferson.
G. W. Nelson,	Brockwayville,	Jefferson.
Dr. H. B. King,	Reynoldsville,	Jefferson.
F. H. Schaffner,	Pueblo,	Jefferson.
*Jeremiah Loudenslager,	Thompsontown,	Juniata.
B. H. Branthoffer,	Mifflintown,	Juniata.
A. C. Diffenderfer,	Mifflintown,	Juniata.
J. P. Calboun,	Mifflin,	Juniata.
D. G. Alter,	Port Royal,	Juniata.
H. W. Musser,	E. Waterford,	Juniata.
Joshua E. Buchanan,	Blacklog,	Juniata.
T. E. Sebillng,	Summit,	Lackawanna.
H. E. Gallagher,	Carbondale,	Lackawanna.
Dr. G. Philip Saxer,	Fleetville,	Lackawanna.
Henry C. Hoffman,	Mount Cobb,	Lackawanna.
*Dr. Thos. W. Wilson,	Moscow,	Lackawanna.
Eugene Noak,	Moscow,	Lackawanna.
*A. L. Siglin,	Clifton,	Lackawanna.
Jas. McCarty,	Gouldsboro,	Lackawanna.
Horace Holcomb,	Rausom,	Lackawanna.
J. F. Brubaker,	New Holland,	Lancaster.
J. H. Deen,	Lancaster,	Lancaster.
*Harry Jenkins,	Conestoga,	Lancaster.
Chas. H. Kreider,	Conestoga,	Lancaster.
B. H. Pownall,	Christiana,	Lancaster.
Dr. W. S. Tinney,	Strasburg,	Lancaster.
Heber M. James,	Quarryville,	Lancaster.
S. C. Groff,	Quarryville, No. 1,	Lancaster.
Wakeman Wesley,	Oak Hill,	Lancaster.
Henry Windolph,	Marietta,	Lancaster.
L. D. Rutherford,	Elizabethtown,	Lancaster.
Chas. McClond,	Manheim,	Lancaster.
Jacob Witmyer,	Ephrata,	Lancaster.
Dr. R. S. Schweitzer,	Adamstown,	Lancaster.
H. B. Clepper,	Columbia,	Lancaster.
Jerre Mumma,	Brownstone,	Lancaster.
*David Hamilton,	Volant, No. 2,	Lawrence.
J. A. Magee,	Volant,	Lawrence.
Mehard Neal,	New Wilmington,	Lawrence.
Harry L. Torrance,	Pulaski,	Lawrence.
E. N. Houk,	New Castle, No. 1,	Lawrence.
J. A. Stickle,	Princeton,	Lawrence.
S. W. Wilson,	New Castle,	Lawrence.

TOWNSHIP HEALTH OFFICERS—Cont'd.

Health Officer.	Residence.	County.
*J. S. Young,	New Castle,	Lawrence.
*Robt. Forsythe,	New Castle, No. 3,	Lawrence.
A. S. Moore,	New Castle,	Lawrence.
*R. M. Leslie,	Moravia,	Lawrence.
J. C. Bright,	Moravia,	Lawrence.
L. W. Hawthorne,	New Castle,	Lawrence.
J. B. Moyer,	Myerstown,	Lebanon.
*C. E. Daubert,	Lebanon,	Lebanon.
Geo. S. Trafford,	Lebanon, No. 6,	Lebanon.
*Thos. E. Smith,	Annaville,	Lebanon.
John Walter,	Annaville,	Lebanon.
Wm. W. Hinterleiter,	Jonestown,	Lebanon.
E. G. Withers,	Palmyra,	Lebanon.
*Harry Wunderlich,	Lebanon,	Lebanon.
Saml. A. Sowden,	Slatesdale,	Lehigh.
*M. A. Follweiler,	Wanamaker,	Lehigh.
B. J. Schlosser,	Schnecksville,	Lehigh.
Worden F. Fritzingier,	New Tripoli,	Lehigh.
P. F. Brown,	Allentown,	Lehigh.
B. F. Sell,	East Texas,	Lehigh.
*Wm. Kuhns,	Center Valley,	Lehigh.
E. G. Erney,	Limeport,	Lehigh.
W. D. Shiffert,	Macungie,	Lehigh.
R. H. Smith,	Sybertsville,	Luzerne.
Paul G. Frey,	Nescopeck,	Luzerne.
M. F. Whitebread,	Wapwallopen,	Luzerne.
James Collins,	Hazleton,	Luzerne.
W. L. Richards,	Drums,	Luzerne.
Henry Deisenroth,	Freeland,	Luzerne.
H. F. Good,	Wapwallopen,	Luzerne.
Adam Knies,	Mountain Top,	Luzerne.
*Thomas Kasen,	Wilkes-Barre,	Luzerne.
*Daniel Keiper,	White Haven,	Luzerne.
*Edward Quinn,	Plymouth,	Luzerne.
Dr. C. A. Long,	Muhlenberg,	Luzerne.
W. R. Wiant,	Shickshinny,	Luzerne.
Thos. McCormack,	Plains,	Luzerne.
John McLean,	Pittston,	Luzerne.
Dr. P. E. Hubler,	W. Pittston,	Luzerne.
D. E. Thomas,	Luzerne,	Luzerne.
Chas. D. Huff,	Idetown, Dallas, R. D.,	Luzerne.
Dr. W. E. Delaney,	Slate Run,	Lycoming.
Dr. J. L. Mansuy,	Ralston,	Lycoming.
Thos. F. Connelly,	Trout Run,	Lycoming.
C. B. Seely,	Jersey Shore,	Lycoming.
Harry Harman,	Montgomery,	Lycoming.
Robert J. Crawford,	Muncy,	Lycoming.
G. O. Gray,	Hughesville,	Lycoming.
Dr. C. C. Cooner,	Picture Rocks,	Lycoming.
Henry Coder,	Montoursville,	Lycoming.
Dr. Chas. Youngman,	Williamsport,	Lycoming.
Wm. Roedel,	Bradford,	McKean.
Wm. A. Connelly,	Ludlow,	McKean.
Fred Falkenberg,	Mt. Jewett,	McKean.
C. W. Bishop,	Port Allegheeny,	McKean.
Dr. W. A. Ostrander,	Smethport,	McKean.
W. A. Harler,	Eldred,	McKean.
H. E. Moats,	Jamestown, No. 42,	Mercer.
*D. L. Kamerer,	Greenville,	Mercer.
G. B. Nevin,	Greenville,	Mercer.
R. L. Campbell,	Kennard,	Mercer.
R. D. Kerr,	Sandy Lake,	Mercer.
R. A. Fowler,	Sandy Lake,	Mercer.

TOWNSHIP HEALTH OFFICERS—Cont'd.

Health Officer.	Residence.	County.
*O. H. Burdette,	Stoneboro,	Mercer.
Paul L. Moore,	Stoneboro,	Mercer.
J. H. McCurdy,	Jackson Centre,	Mercer.
*Dr. John Borland,	Grove City,	Mercer.
Isaac White,	Grove City,	Mercer.
D. E. Moffatt,	Mercer,	Mercer.
V. B. Knapp,	Fredonia,	Mercer.
*Aug. Miller,	Sharon,	Mercer.
Samuel Kerr,	Sharon,	Mercer.
W. J. Porter,	Pulaski (Lawrence Co.),	Mercer.
*C. S. Stewart,	Clark,	Mercer.
John L. Bell,	Clark,	Mercer.
Geo. W. McElhone,	Newton Hamilton,	Mifflin.
*C. E. Shaeffer,	McVeytown,	Mifflin.
*A. T. Hamilton,	Lewistown,	Mifflin.
Chas. A. Zerbe,	Lewistown,	Mifflin.
*Albert S. Gibhoney,	Reedsville,	Mifflin.
Wm. J. Burus,	Reedsville,	Mifflin.
Chas. A. Iantz,	Belleville,	Mifflin.
A. H. Schoonover,	Stroudsburg,	Monroe.
Allen Shupp,	Gilbert,	Monroe.
George F. Smith,	Mount Pocono,	Monroe.
G. M. Bare,	Bridgeport,	Montgomery.
C. E. White,	Norristown,	Montgomery.
Wm. Neville,	Conshohocken,	Montgomery.
*Dr. D. W. Shelly,	Ambler,	Montgomery.
R. E. Gift,	Ambler,	Montgomery.
*S. P. Seese,	Lansdale,	Montgomery.
Edwin J. Kuhns,	Lansdale,	Montgomery.
Levi Reeder,	Souderton,	Montgomery.
Reinhart J. Weber,	Red Hill,	Montgomery.
Dr. Warren S. Anders,	Trappe,	Montgomery.
Clymer Missimer,	Pottstown,	Montgomery.
*J. E. Blanck,	Greenlane,	Montgomery.
A. B. Bernhardt,	Greenlane,	Montgomery.
Ira F. Fisher,	Willow Grove,	Montgomery.
A. A. Switzer,	Washingtonville,	Montour.
B. B. Brown,	Danville,	Montour.
W. C. Robbins,	Pottsgrove (Northumb'l Co.),	Montour.
Wm. A. Lynn,	S. Bethlehem,	Northampton.
G. L. Ebner,	Glendon-Easton,	Northampton.
*Dr. W. G. Tillman,	Easton,	Northampton.
*J. J. Bunsteln,	Easton,	Northampton.
Owen R. Leyrer, Sr.,	Easton,	Northampton.
Hiram W. Laubach,	Bethlehem,	Northampton.
Stephen A. Trein,	Nazareth,	Northampton.
L. W. Seigfreid,	Bath,	Northampton.
Christian Mann,	Bangor,	Northampton.
Milton Huston,	Portland,	Northampton.
F. S. Fenstermacher,	Dalmatia,	Northumberland.
*Benjamin Machamer,	Trevorton,	Northumberland.
Geo. E. Wagner,	Trevorton,	Northumberland.
*Wm. Burkett,	Mt. Carmel,	Northumberland.
*Harry Leiby,	Snydertown,	Northumberland.
R. B. Bird,	Riverside,	Northumberland.
A. A. Mettler,	Sunbury,	Northumberland.
S. S. Burg (Dr.),	Northumberland,	Northumberland.
Nathan Furman,	Montandon,	Northumberland.
Roscoe Blain,	Turbotville,	Northumberland.
Dr. B. H. Anderson,	Andersonburg,	Perry.
J. K. Adair,	Landisburg,	Perry.
A. W. Orwan,	Newport,	Perry.
*Samuel Shope,	Marysville,	Perry.

TOWNSHIP HEALTH OFFICERS—Cont'd.

Health Officer.	Residence.	County.
Isaac Kunkle,	Marysville,	Perry.
*Brandt Free,	New Buffalo,	Perry.
W. E. Meek,	New Buffalo,	Perry.
*Park Holman,	Liverpool,	Perry.
W. C. Moore,	Millerstown,	Perry.
Jacob Coble,	Newport,	Perry.
Dr. J. D. Baker,	Eschol,	Perry.
*J. W. Mader,	Duncannon,	Perry.
S. S. Orris,	Duncannon,	Perry.
Martin Hatton,	Dingmans' Ferry,	Pike.
E. C. Wood,	Milford,	Pike.
Dr. W. R. Shannon,	Lackawaxen,	Pike.
C. A. Pellett,	Paupac,	Pike.
C. A. Terlinne,	Ulysses,	Potter.
Adelbert Whitney,	Genesee,	Potter.
*J. M. Drake,	Shinglehouse,	Potter.
Dr. J. A. Woodward,	Shinglehouse,	Potter.
D. B. Fessenden,	Roulette,	Potter.
F. E. Dunchart,	Condersport,	Potter.
D. E. Baker,	Austin,	Potter.
C. H. Francis,	Galeton,	Potter.
*W. M. Richardson,	Cross Forks,	Potter.
F. L. Brown,	Anburn,	Schuylkill.
Emanuel Kauffman,	Orwigsburg,	Schuylkill.
J. H. Butz,	Schuylkill Haven,	Schuylkill.
*Dr. George Little,	Tamaqua,	Schuylkill.
J. B. Tyler,	Tamaqua,	Schuylkill.
L. B. Schock,	Tamaqua,	Schuylkill.
E. F. Hamsher,	Barnesville,	Schuylkill.
*J. H. Kirehner,	Mahanoy City,	Schuylkill.
Jos. Bruno,	Kelayres,	Schuylkill.
Frank Warmby,	Nuremburg,	Schuylkill.
James H. Seymour,	Mahanoy City,	Schuylkill.
Thos. H. May,	Shaft,	Schuylkill.
J. J. Conner,	Ashland,	Schuylkill.
J. S. Willier,	Kehlor,	Schuylkill.
Richard Jones,	Minersville,	Schuylkill.
*Henry C. Kries,	Middleport,	Schuylkill.
G. I. Derr,	Tremont,	Schuylkill.
*Daniel Brennan,	Glen Carbon,	Schuylkill.
Timothy Brennan,	Heckscherville,	Schuylkill.
Ira J. Erdman,	Klingerstown,	Schuylkill.
George Knittle,	New Ringgold,	Schuylkill.
George F. Seesholtz,	Tower City,	Schuylkill.
*Harvey D. Erdman,	Klingerstown,	Schuylkill.
Newton Koppenhaver,	Valley View,	Schuylkill.
John Sutton,	Pine Grove,	Schuylkill.
S. F. Aurand,	Beaver Springs,	Snyder.
Dr. Marand Rothrock,	Mt. Pleasant Mills,	Snyder.
F. B. Ulrich,	Selinsgrove,	Snyder.
Robert Beaver,	Beavertown,	Snyder.
Orville Fike,	Confluence,	Somerset.
H. L. Martz,	Barrondale,	Somerset.
*Dr. G. B. Masters,	Rockwood,	Somerset.
Chas. E. Eagle,	Rockwood,	Somerset.
H. F. Fogle,	Elk Lick,	Somerset.
Dr. E. F. Hemminger,	Meyersdale,	Somerset.
W. C. Paul,	Sand Patch,	Somerset.
*Sam'l Gaumer,	Williams,	Somerset.
C. H. Eyook,	Hooversville,	Somerset.
Wm. Long,	Vellersburg,	Somerset.
M. O. Barkley,	Fairhope,	Somerset.
Jno. W. Sturtz,	Fairhope,	Somerset.
J. H. Rentz,	Berlin,	Somerset.

TOWNSHIP HEALTH OFFICERS—Cont'd.

Health Officer.	Residence.	County.
*I. M. Hoover,	Hooversville,	Somerset.
Calvin Fulton,	Stoyestown,	Somerset.
W. M. Gohn,	Boswell,	Somerset.
Alex. Casebeer,	Somerset,	Somerset.
Herman F. Swank,	Somerset,	Somerset.
Dr. H. A. Zimmerman,	Hollsopple,	Somerset.
J. H. Spence,	Bernice,	Sullivan.
George Brown,	Lopez,	Sullivan.
F. W. Ruck,	Muncy Valley,	Sullivan.
J. E. Bird,	Dushore,	Sullivan.
W. E. Porter,	Shunk,	Sullivan.
Wm. N. Harrison,	Hills Grove,	Sullivan.
Richard Foran,	Friendsville,	Susquehanna.
Dr. A. S. Blair,	Hallstead,	Susquehanna.
Dr. S. Birdsall,	Susquehanna,	Susquehanna.
L. B. Whitney,	Thompson,	Susquehanna.
T. B. Dimmick,	Uniondale,	Susquehanna.
J. W. Jones,	Forest City,	Susquehanna.
H. A. Robbins,	Harford,	Susquehanna.
E. B. Norris,	New Milford,	Susquehanna.
*M. W. Denison,	Montrose,	Susquehanna.
H. S. Conklin,	Montrose,	Susquehanna.
F. S. Greenwood,	Lynn,	Susquehanna.
J. A. Vandergrift,	Hoytville,	Tioga.
J. H. Bastian,	Liberty,	Tioga.
L. G. Austlin,	Ogdensburg,	Tioga.
E. E. Wood,	Rutland,	Tioga.
F. J. Everitt,	Jackson Summit,	Tioga.
John Duff,	Arnot,	Tioga.
E. C. Howell,	Wellsboro,	Tioga.
Harry Orr,	Wellsboro,	Tioga.
W. G. Sears,	Gaines,	Tioga.
F. W. Clark,	Mansfield,	Tioga.
Wm. Bennett,	Elkland,	Tioga.
Lavern Webster,	Tioga,	Tioga.
Dr. E. E. Clark,	Knoxville,	Tioga.
G. H. Simmons,	Westfield,	Tioga.
*Lynn E. Marks,	Middlebury,	Tioga.
A. Lee Kemp,	Nelson,	Tioga.
J. A. Spigelmyer,	Millmont,	Union.
*J. S. McCreight,	Lewisburg,	Union.
James L. Sanders,	Mifflintown,	Union.
J. R. McCurley,	Allenwood,	Union.
S. W. Rifenburg,	Pleasantville,	Venango.
G. W. Dille,	Cooperstown,	Venango.
Jos. Holtzman,	Oil City,	Venango.
J. W. Plunpton,	Oil City,	Venango.
*Geo. McKinley,	Franklin,	Venango.
L. E. Grove,	Franklin,	Venango.
A. E. Singleton,	Utica,	Venango.
Dr. C. P. Snyder,	Polk,	Venango.
J. A. Riddle,	Grove City,	Venango.
*Howard Jolly,	Pittsville,	Venango.
J. H. Crawford,	Eminton,	Venango.
Archie Damon,	Columbus,	Warren.
H. J. Spencer,	Spring Creek,	Warren.
John Spencer,	Chandlers Valley,	Warren.
J. H. Bierce,	Warren,	Warren.
Henry Howard,	Clarendon,	Warren.
C. R. Morrison,	Kinzua,	Warren.
R. H. McDowell,	Youngsville,	Warren.
E. T. Mowris,	Tidioute,	Warren.
Wm. H. Maulby,	Grand Valley,	Warren.

SIXTH ANNUAL REPORT OF THE TOWNSHIP HEALTH OFFICERS—Cont'd.

Health Officer.	Residence.	County
*G. M. Miller,	Burgettstown,	Washington.
*W. G. Shullette,	Burgettstown,	Washington.
A. L. McConnell,	Florence,	Washington.
Dr. A. L. Runion,	Canonsburg,	Washington.
J. H. Chamberlin,	Finleyville,	Washington.
J. D. Wickersham,	Monongahela,	Washington.
J. A. Carson,	Speers,	Washington.
John G. Lowers,	Elco,	Washington.
Chas. E. Willock,	Coal Center,	Washington.
John Hawthorne,	Millsboro,	Washington.
Dr. E. B. French,	Ellsworth,	Washington.
E. M. C. Crawford,	Washington,	Washington.
F. H. Condit,	Amity,	Washington.
Dr. R. W. Wolfe,	Taylorstown,	Washington.
J. A. Dickey,	Claysville,	Washington.
J. D. France,	W. Middletown,	Washington.
*F. E. Rohrbacher,	Angels,	Wayne.
Alvis L. Hoag,	S. Sterling,	Wayne.
Dr. H. C. White,	Ariel,	Wayne.
Luther Bryant,	Waymart,	Wayne.
S. B. Woodmansee,	Lake Como,	Wayne.
Dr. S. Amos Ward,	Bethany,	Wayne.
*Dr. F. S. Prisdie,	Equinunk,	Wayne.
*O. S. Tyner,	Equinunk,	Wayne.
Chas. E. Boyd,	Boyd's Mills,	Wayne.
N. B. Spencer,	Honesdale,	Wayne.
Edgar Tutbill,	Hawley,	Wayne.
Dr. Edward B. Gavitt,	White Mills,	Wayne.
*J. M. Bonar,	New Kensington,	Westmoreland.
*J. A. Grimm,	Vandergrift,	Westmoreland.
C. L. Zimmerman,	Leechburg (Armstrong Co.),	Westmoreland.
Chas. Gallagher,	Salina,	Westmoreland.
H. A. Waddell,	Delmont,	Westmoreland.
Ellis Wissinger,	Tunnelton (Ind. Co.),	Westmoreland.
Dr. H. W. Tittle,	New Florence,	Westmoreland.
*Dr. H. C. Updegraff,	Bolivar,	Westmoreland.
Dr. L. J. Reese,	Bolivar,	Westmoreland.
W. M. Nicely,	Ligonier,	Westmoreland.
G. W. Stough,	Stahlstown,	Westmoreland.
J. G. Thompson,	Mt. Pleasant,	Westmoreland.
J. Frank Evans,	Ruffsdales,	Westmoreland.
N. E. Rhoads,	Smithton,	Westmoreland.
*A. L. Arner,	Monessen,	Westmoreland.
J. B. White,	Monessen,	Westmoreland.
M. C. Faylor,	Hermie,	Westmoreland.
C. W. Merhoff,	Irwin,	Westmoreland.
W. A. Kemerer,	Jeannette,	Westmoreland.
*Dr. R. J. Hunter,	Greensburg,	Westmoreland.
J. W. Jones,	Greensburg,	Westmoreland.
E. G. Crossland,	Latrobe,	Westmoreland.
O. F. Ettwein,	Noxen,	Wyoming.
C. B. Pickett,	Laceyville,	Wyoming.
W. H. Comstock,	Mehoopany,	Wyoming.
C. Y. Burch,	Tunkhannock,	Wyoming.
S. S. Jenkins,	Nicholson,	Wyoming.
R. A. Baker,	Dalton,	Wyoming.
J. C. Turner,	Falls,	Wyoming.
B. Payne Manifold,	Stewartstown,	York.
C. F. Heisler,	Dallastown,	York.
J. E. Wiley,	Delta, No. 4,	York.
C. K. Weaver,	Dillsburg,	York.
E. A. Harbold,	Dover,	York.
W. S. Young,	E. Prospect,	York.
J. W. Brooks,	Fawn Grove,	York.
*H. S. Byers,	Newberrytown,	York.

Township Health Officers— Cont'd.

Health Officer.	Residence.	County
F. Y. Stambaugh,	Hanover,	York.
G. M. Hess,	New Cumberland (Cumb. Co.),	York.
Dr. C. G. Hildebrand,	Loganville,	York.
*Dr. R. S. Stable,	York,	York.
Lewis Felstel,	York New Salem,	York.
*J. B. Gable,	Stewartstown,	York.
Jacob A. Stein,	Holtz,	York.
David W. Crider,	York,	York.
*Dr. L. A. Roth,	Spring Forge,	York.
C. G. Elleker,	Rossville,	York.
J. W. Collins,	Park,	York.
*W. J. Posey,	Muddy Creek,	York.
Dr. Frank Horning,	Hellam,	York.
Joseph Shaul,	Felton,	York.
E. H. Neiman,	Thomasville,	York.
H. Curtis Krout,	New Freedom,	York.
W. H. Gemmill,	Stewartstown,	York.
*D. W. Brillhart,	Thomasville,	York.
W. S. K. Brown,	Thomasville,	York.
Phares Geiselman,	Jacobus,	York.
Finn Jordan,	Airville,	York.
A. Z. Leib,	East Bernville,	York.
C. H. Markley,	Cly,	York.
Wilson Rehmeyer,	New Freedom,	York.
L. S. Waughtel,	York, No. 4,	York.

APPOINTED IN ACCORDANCE WITH THE REQUIREMENTS OF THE
SCHOOL CODE.SCHOOL MEDICAL INSPECTORS.
FOURTH CLASS SCHOOL DISTRICTS.

Name.	Address.	County.
W. E. Wolf,	Arendtsville,	Adams.
Geo. H. Soaks,	New Oxford,	Adams.
Geo. L. Rice,	McSherrystown,	Adams.
J. U. Dickson,	Gettysburg,	Adams.
N. C. Trout,	Fairfield,	Adams.
E. W. Cashman,	York Springs,	Adams.
J. E. Glenn,	Fairfield,	Adams.
E. G. Spatz,	Hampton,	Adams.
R. E. Poole,	Castle Shannon,	Allegheny.
S. J. S. Pife,	Bridgeville,	Allegheny.
W. L. Henderson,	E. McKeesport,	Allegheny.
R. R. Jones,	Edgewood,	Allegheny.
S. H. Jennings,	Sewickley,	Allegheny.
C. R. Wycoff,	McKees Rocks,	Allegheny.
L. Willard,	Pittsburgh,	Allegheny.
W. H. Cooper,	Oakmont,	Allegheny.
Jno. W. Burkett,	Moon Run,	Allegheny.
A. E. Roose,	Tu tile Creek,	Allegheny.
Jas. McNall,	Wilkinsburg,	Allegheny.
W. A. Arnold,	Tarantum,	Allegheny.
Edward Hland,	Coraopolis,	Allegheny.
W. H. Leffler,	Port Vue,	Allegheny.
E. H. Seatehard,	Sewickley,	Allegheny.
Geo. R. Roberts,	Allison Park,	Allegheny.
W. P. McCulloch,	Cheswick,	Allegheny.
W. A. Jones,	Hays,	Allegheny.
J. S. Crawford,	Ingraham,	Allegheny.
R. F. Hepsley,	Westview,	Allegheny.

SCHOOL MEDICAL INSPECTORS—Cont'd.

Name.	Address.	County.
J. W. Campbell,	Elderson,	Armstrong.
T. N. McKee,	Kittanning,	Armstrong.
J. T. Deemer,	Kittanning No. 1,	Armstrong.
R. A. Walker,	W. Monterey,	Armstrong.
C. B. McGogney,	Kaylor,	Armstrong.
C. E. Sayres,	Hawthorne,	Armstrong.
J. A. Lowry,	South Bend,	Armstrong.
J. W. Ralston,	Kittanning No. 5,	Armstrong.
Bruce H. Snodgrass,	Beaver Falls,	Beaver.
B. B. Snodgrass,	Rochester,	Beaver.
W. M. Miller,	Hookstown,	Beaver.
M. A. Swaney,	Midland,	Beaver.
O. J. Stevenson,	Woodiawn,	Beaver.
W. de la M. Hill,	Bedford,	Bedford.
A. H. King,	Riddlesburg,	Bedford.
B. F. Hunt,	Clearville,	Bedford.
E. L. Smith,	Schellsburg,	Bedford.
H. I. Shoenthal,	New Paris,	Bedford.
M. V. Brant,	Buffalo Mills,	Bedford.
M. F. Clouser,	Oley,	Berks.
H. U. Miller,	W. Leesport,	Berks.
E. P. Lytle,	Birdsboro,	Berks.
H. L. Quickel,	Morgantown,	Berks.
Louis R. Tryon,	Centreport,	Berks.
L. G. Hain,	Shillington,	Berks.
A. A. Stamm,	Mohnton,	Berks.
D. B. McLean,	Douglassville,	Berks.
F. L. R. Mattern,	Fleetwood,	Berks.
M. L. Bertolet,	Mt. Penn,	Berks.
A. M. Bausher,	Temple,	Berks.
H. L. Bollman,	Robesonia,	Berks.
J. M. Walborn,	Leesport,	Berks.
J. W. Wagner,	Hamburg,	Berks.
O. W. Berkey,	Bally,	Berks.
C. E. Lerch,	Wyomissing,	Berks.
Ernest Myers,	Holidaysburg,	Blair.
J. L. Gallagher,	Newry,	Blair.
A. E. Dann,	Canton,	Bradford.
Dr. Woolley,	Canton,	Bradford.
P. S. Carpenter,	Troy,	Bradford.
T. Ben Johnson,	Towanda,	Bradford.
M. B. Ballard,	Troy,	Bradford.
Jos. C. Tripp,	Warren Center,	Bradford.
G. H. B. Terry,	Wyalusing,	Bradford.
W. C. LeCompte,	Bristol,	Bucks.
Francis G. Cope,	Upper Black Eddy,	Bucks.
Henry Lovett,	Langhorne,	Bucks.
W. H. Brown,	Richlandtown,	Bucks.
E. E. Pownell,	Richboro,	Bucks.
Samuel A. Leinbach,	Quakertown,	Bucks.
Alfred E. Pretz,	Sellersville,	Bucks.
Irwin H. Huff,	Sellersville,	Bucks.
Wm. H. Kunsman,	Morrisville,	Bucks.
Howard A. Hellyer,	Penns Park,	Bucks.
E. C. Thompson,	Slippery Rock R. D.,	Butler.
A. J. Edmunds,	Bruin,	Butler.
R. B. Elrick,	Petrolia,	Butler.
G. H. Mathiot,	Mars,	Butler.
R. L. Alison,	Eau Claire,	Butler.
V. F. Thomas,	Evans City,	Butler.
W. B. Campbell,	Harrisville,	Butler.
C. L. DeWolf,	Chicoira,	Butler.
W. R. Hockenberry,	Slippery Rock,	Butler.
J. R. McDowell,	Freeport, Armstrong Co.,	Butler.
E. L. Jones,	Loretto,	Cambria.
Fremont C. Jones,	Ebensburg,	Cambria.
Edwin T. Ealy,	Emelgh,	Cambria.
Jacob A. Comer,	Vintondale,	Cambria.
A. E. Fichtner,	Johnstown,	Cambria.
Harry Somerville,	Chest Springs,	Cambria.
H. T. Prideaux,	Cresson,	Cambria.
W. O. Lubken,	Johnstown,	Cambria.
J. D. Kelper,	Johnstown,	Cambria.
Geo. Martin,	Conemaugh,	Cambria.
J. F. Schofield,	Portage,	Cambria.
A. W. Brinham,	Scalp Level,	Cambria.
F. W. Ferguson,	Gallitzin,	Cambria.
L. M. Gurley,	Westmont (Johnstown),	Cambria.
J. C. Blaisdell,	Wilmore,	Cambria.
W. E. Matthews,	Johnstown,	Cambria.

SCHOOL MEDICAL INSPECTORS—Cont'd.

Name.	Address.	County.
V. K. Corbett,	Driftwood,	Cameron.
H. S. Falk,	Emporium,	Cameron.
J. K. Farrar,	Andenreid,	Carbon.
R. S. Moyer,	E. Mauch Chunk,	Carbon.
A. M. Sittler,	Bowmans,	Carbon.
E. G. Bray,	E. Mauch Chunk,	Carbon.
Dr. Ruch,	Summit Hill,	Carbon.
G. R. Hayes,	Bellefonte,	Centre.
J. C. Rogers,	Bellefonte,	Centre.
P. H. Dale,	State College,	Centre.
Edw. Harris,	Snow Shoe,	Centre.
L. E. Kidder,	Boalsburg,	Centre.
S. G. Coons,	Stromstown,	Centre.
S. M. Harsuburger,	Port Matilda,	Centre.
C. E. McGirk,	Phillipsburg,	Centre.
J. R. Maxwell,	Parkesburg,	Chester.
Wm. E. Ewing,	West Grove,	Chester.
L. Linwood Corson,	Glen More,	Chester.
W. F. Cassel,	Spring City,	Chester.
Jos. Scattergood,	West Chester,	Chester.
R. A. Walker,	W. Monterey,	Clarion.
N. M. Meals,	Callensburg,	Clarion.
G. B. Woods,	Curtsville,	Clarion.
B. G. Wilson,	Clarion,	Clarion.
J. M. E. Brown,	New Bethlehem,	Clarion.
J. M. Fitzgerald,	Clarion,	Clarion.
Jno. B. Miller,	Sligo,	Clarion.
R. S. Keeler,	St. Petersburg,	Clarion.
C. E. Sayres,	Hawthorne,	Clarion.
R. R. Jordan,	DuBois,	Clearfield.
G. E. Mauk,	Woodland,	Clearfield.
R. S. Williams,	Houtzdale,	Clearfield.
Dr. McGirk,	Phillipsburg,	Clearfield.
H. O. Kling,	Curwensville,	Clearfield.
W. W. Senn,	Munson Station,	Clearfield.
H. A. Woodside,	Lumber City,	Clearfield.
J. P. Rowles,	Mahaffey,	Clearfield.
W. C. Browne,	Mahaffey,	Clearfield.
I. W. Harper,	Irvona,	Clearfield.
A. D. Cowdrick,	Clearfield,	Clearfield.
I. S. Fiegal,	Karthus,	Clearfield.
Jos. M. Corson,	Chatham's Run,	Clinton.
Jno. M. Dunn,	Mackeyville,	Clinton.
J. B. Watson,	Lock Haven,	Clinton.
Saylor J. McGhee,	Mill Hall,	Clinton.
Jno. K. Gilmore,	Renovo,	Clinton.
L. B. Kline,	Catawissa,	Columbia.
J. Fred Pfaltzer,	Berwick,	Columbia.
J. A. Carnes,	Aristes,	Columbia.
D. M. Hess,	Rohrsburg,	Columbia.
S. B. Arment,	Bloomsburg,	Columbia.
G. M. Gemmiel,	Millville,	Columbia.
Ambrose Shuman,	Catawissa,	Columbia.
J. R. Montgomery,	Bloomsburg,	Columbia.
G. E. Baker,	Benton,	Columbia.
G. E. Follmer,	Orangeville,	Columbia.
W. E. Geer,	Lincolnton,	Crawford.
F. D. Young,	Cambridge Springs,	Crawford.
H. L. Brush,	Conneaut Lake,	Crawford.
W. E. Hyskell,	Meadville,	Crawford.
J. C. Coulter,	Cochranstown,	Crawford.
C. W. Burgwin,	Guys Mills,	Crawford.
S. F. Hazen,	Hartstown,	Crawford.
A. W. Clouse,	Geneva,	Crawford.
S. J. Dickey,	Blooming Valley,	Crawford.
R. S. Smith,	Saegertown,	Crawford.
W. H. Quay,	Townville,	Crawford.
J. K. Roberts,	Meadville,	Crawford.
H. M. Daniels,	Woodcock,	Crawford.
Harvey Bashore,	West Fairview,	Cumberland.
D. W. VanCamp,	Plainfield,	Cumberland.
E. C. Nealey,	Newville,	Cumberland.
G. W. Irwin,	Mt. Holly Springs,	Cumberland.
E. R. Plank,	Carlisle,	Cumberland.
B. McCreary,	Shippensburg,	Cumberland.
T. W. Preston,	Balfour P. O.,	Cumberland.
C. S. Martyn,	Elizabethville,	Dauphin.
A. C. Coble,	Dauphin,	Dauphin.
Dr. McDaniels,	Highspire,	Dauphin.

SCHOOL MEDICAL INSPECTORS—Cont'd.

Name.	Address.	County.
Dr. Spencer,	Wiconisco,	Dauphin.
W. M. Shull,	Hummelstown,	Dauphin.
Dr. Hottenstein,	Millersburg,	Dauphin.
Dr. M. Lehr,	Lykens,	Dauphin.
A. L. Shope,	Penbrook,	Dauphin.
G. M. Stites,	Williamstown,	Dauphin.
Norman Smith,	Rutledge,	Delaware.
E. C. Bullock,	Upland,	Delaware.
W. W. Betts,	Chadds Ford,	Delaware.
Fred C. Baldi,	Collingdale,	Delaware.
D. A. Dalton,	Sharon Hill,	Delaware.
H. F. Taylor,	Ridley Park,	Delaware.
Wm. F. Moore,	Llanerch,	Delaware.
John McKenna,	Lansdowne,	Delaware.
I. B. Roberts,	Llanerch,	Delaware.
C. H. Schoff,	Media,	Delaware.
M. A. Neufeld,	Chester,	Delaware.
Henry Price,	Swarthmore,	Delaware.
E. M. Harvey,	Media,	Delaware.
J. G. Thomas,	Newton Square,	Delaware.
Henry C. Dooling,	Norwood,	Delaware.
J. Wm. Wood,	Chester,	Delaware.
Wm. F. Lehman,	Chester,	Delaware.
A. A. Mulhaupt,	St. Marys,	Elk.
Geo. Hutchinson,	Dagus Mines,	Elk.
S. E. Hays,	Weedville,	Elk.
M. M. Rankin,	Ridgway,	Elk.
Stanley Barrett,	Wilcox,	Elk.
E. B. Sbarp,	Johnsonburg,	Elk.
G. P. Spaulding,	Albion,	Erie.
Frank Rutherford,	Cranesville,	Erie.
P. C. Hart,	Girard,	Erie.
R. O. Woodruff,	Waterford,	Erie.
C. L. Allen,	Wesleyville,	Erie.
J. B. Howe,	Erie,	Erie.
W. J. Humphrey,	Union City,	Erie.
V. B. Eiler,	McKean,	Erie.
M. S. Gillespie,	Edinboro,	Erie.
R. O. Woodruff,	Waterford,	Erie.
S. W. Sweigert,	Wattsburg,	Erie.
J. C. Danville,	North East,	Erie.
H. J. Bell,	Dawson,	Fayette.
M. A. Noon,	Everson,	Fayette.
M. H. Cloud,	Masontown,	Fayette.
Harry Brady,	Masontown, R. D.,	Fayette.
J. M. Jackson,	Mill Run,	Fayette.
Walter Messmore,	Smithfield,	Fayette.
Geo. B. Hansel,	Fayette City,	Fayette.
T. J. Bovard,	Tionesta,	Forest.
F. A. Bushey,	Greencastle,	Franklin.
H. X. Bonbrake,	Chambersburg,	Franklin.
Thos. White,	Orrstown,	Franklin.
J. M. McKibben,	Amaranth,	Fulton.
S. J. Titus,	Jefferson,	Greene.
B. J. Birch,	Greensboro,	Greene.
C. J. Kerr,	Jefferson,	Greene.
L. S. McNelly,	Kirby,	Greene.
H. C. Wilson,	Warriors Mark,	Huntingdon.
L. E. Wolfe,	James Creek,	Huntingdon.
J. M. Steele,	Huntingdon,	Huntingdon.
G. W. Simpson,	Mill Creek,	Huntingdon.
B. E. Himes,	Shade Gap,	Huntingdon.
J. M. Fleming,	Blairs Mills,	Huntingdon.
Raymond Decker,	Orbisonia,	Huntingdon.
W. D. Hall,	Gipsy,	Indiana.
J. C. Gourley,	Hellwood,	Indiana.
V. L. Shields,	Kent,	Indiana.
Jas. H. Peterman,	Cherrytree,	Indiana.
William A. Evans,	Clymer,	Indiana.
Geo. Humphrey,	Brookwayville,	Jefferson.
J. A. Haven,	Brookville,	Jefferson.
J. A. Newcome,	Seigel,	Jefferson.
J. P. Raine,	Sykesville,	Jefferson.
P. P. Horner,	Coolspring,	Jefferson.

SCHOOL MEDICAL INSPECTORS—Cont'd.

Name.	Address.	County.
J. G. Headings,	Port Royal,	Juniata.
I. G. Headings,	McAllisterville,	Juniata.
W. H. Bañes,	MillIntown,	Juniata.
B. F. Long,	Millin,	Juniata.
J. W. Deckard,	Richfield,	Juniata.
W. H. Haines,	Thompsonstown,	Juniata.
A. W. Shelley,	Port Royal,	Juniata.
C. A. Kerling,	Gouldsboro,	Lackawanna.
Dr. Zeller,	Dalton,	Lackawanna.
Dr. Lowery,	Carbondale,	Lackawanna.
S. B. Davis,	Jermyn,	Lackawanna.
J. W. Knedler,	Moscow,	Lackawanna.
Wm. R. Davies,	Scranton,	Lackawanna.
P. De Long,	Scranton,	Lackawanna.
H. O. Baldwin,	Dalton,	Lackawanna.
R. S. Schweitzer,	Adamstown,	Lancaster.
C. C. Kinard,	Lincoln,	Lancaster.
W. T. Wo th,	Bainbridge,	Lancaster.
H. S. Dissler,	Denver,	Lancaster.
E. R. Miller,	Stevens,	Lancaster.
T. M. Rohrer,	Quarryville,	Lancaster.
B. F. Good,	Letort,	Lancaster.
Paul Wentz,	New Holland,	Lancaster.
J. L. Mowery,	Lancaster,	Lancaster.
T. S. Irvin,	Christiana,	Lancaster.
Albert S. Hough,	Elizabethtown,	Lancaster.
R. Reeser,	Columbia,	Lancaster.
W. N. Keylor,	Leacock,	Lancaster.
Jesse D. Moore,	New Castle,	Lawrence.
Jesse Grim,	Mt. Jackson,	Lawrence.
R. G. Miles,	New Castle,	Lawrence.
Wm. Clealand,	Harlansburg,	Lawrence.
H. D. Boyles,	New Castle,	Lawrence.
John D. Tucker,	New Castle,	Lawrence.
W. A. Shannon,	Ellwood City,	Lawrence.
H. B. Barr,	New Wilmington,	Lawrence.
R. M. Rank,	Annaville,	Lebanon.
Simon D. Bashore,	Palmyra,	Lebanon.
B. Frank Witmer,	Bismark,	Lebanon.
Henry L. Trumbauer,	Coopersburg,	Lehigh.
Jacob T. Rutz,	Allentown,	Lehigh.
M. J. Backenstoe,	Emaus,	Lehigh.
Ralph W. Snoden,	Slatedale,	Lehigh.
Asher Kreibel,	Lynville,	Lehigh.
Oscar E. Henritzky,	Slatington,	Lehigh.
M. A. Barton,	Plains,	Luzerne.
D. A. Heubner,	Gowen,	Luzerne.
M. C. Rumbaugh,	Dorrancton,	Luzerne.
S. L. Underwood,	Pittston,	Luzerne.
H. M. Neale,	U. Lehigh,	Luzerne.
John Howorth,	Wilkes-Barre,	Luzerne.
R. S. Woehrl,	Miners Mills,	Luzerne.
P. F. Brosius,	Hazleton,	Luzerne.
A. C. Brooks,	Wilkes-Barre,	Luzerne.
J. E. Schaffer,	Cogan Station, R. D.,	Lycoming.
Chas. Schneider,	S. Williamsport,	Lycoming.
C. W. Youngman,	Williamsport,	Lycoming.
A. T. Welker,	Collomsville,	Lycoming.
A. P. Hull,	Montgomery,	Lycoming.
W. E. Delaney,	Slate Run,	Lycoming.
J. L. Mansuy,	Ralston,	Lycoming.
J. W. Van Horn,	Montoursville,	Lycoming.
M. H. Smith,	Hughesville,	Lycoming.
T. K. Wood,	Muncy,	Lycoming.
C. C. Cooner,	Picture Rocks,	Lycoming.
Robert Milnor,	Warrensville,	Lycoming.
E. M. McLean,	Eldred,	McKean.
W. Clyde Hogan,	Bradford,	McKean.
G. F. Dandoir,	Ludlow,	McKean.
Dr. Elliott,	Mt. Jewett,	McKean.
Wm. J. McGranor,	Port Alleghany,	McKean.
Thos. F. Hogue,	Fredonia,	Mercer.
A. I. Hoon,	Mercer,	Mercer.
Frank Bleakney,	Grove City,	Mercer.
J. D. Hoffman,	Jackson Centre,	Mercer.
Paul T. Hope,	Mercer,	Mercer.
E. F. Nelson,	Grove City,	Mercer.
W. E. Campbell,	New Lebanon,	Mercer.
T. J. Grace,	Clark's Mills,	Mercer.

SIXTH ANNUAL REPORT OF THE SCHOOL MEDICAL INSPECTORS—Cont'd.

Name.	Address.	County.
Geo. Bagnell,	Jackson Centre,	Mercer.
O. W. Bean,	Sheakleyville,	Mercer.
Ira H. Cotten,	Leesburg,	Mercer.
J. B. Laughrey,	Jamestown,	Mercer.
D. H. Smith,	Mill Brook,	Mercer.
C. J. Stambaugh,	Reedsville,	Mifflin.
C. M. Johnson,	McVeytown,	Mifflin.
Andrew Godfrey,	Ambler,	Montgomery.
Leon C. Wills,	Bridgeport,	Montgomery.
Thos. Redding,	Hathoro,	Montgomery.
D. B. Moyer,	Hatfield,	Montgomery.
W. B. Jamison,	Jenkintown,	Montgomery.
Clarence T. Farles,	Narberth,	Montgomery.
Reed Roberts,	Norristown,	Montgomery.
Benj. A. Tyler,	Royersford,	Montgomery.
W. Warren Funk,	Chestnut Hill,	Montgomery.
W. Z. Anders,	Trappe,	Montgomery.
J. C. Laudis,	Pennsburg,	Montgomery.
Erwin F. Renner,	Salfordville,	Montgomery.
J. H. Seiple,	Centre Square,	Montgomery.
Geo. A. Stock,	Danville,	Montour.
W. D. Chase,	Bethlehem,	Northampton.
W. M. Phillips,	Chapman,	Northampton.
W. G. Tillman,	Easton,	Northampton.
J. C. Keller,	Wind Gap,	Northampton.
D. M. Nipple,	Turbotville,	Northumberland.
R. W. Montelius,	Mt. Carmel,	Northumberland.
S. S. Berg,	Northumberland,	Northumberland.
N. M. Smith,	Riverside,	Northumberland.
J. B. Cressinger,	Saulbury,	Northumberland.
J. B. Lark,	Trevorton,	Northumberland.
E. B. McCre,	New Bloomfield,	Perry.
J. A. Shelby,	Shermansdale,	Perry.
G. S. Kinzer,	Markleville,	Perry.
A. R. Johnston,	New Bloomfield,	Perry.
L. B. Smith,	Bushkill,	Pike.
W. B. Kennedy,	Milford,	Pike.
Dr. Simons,	Greentown,	Pike.
H. D. Hart,	Genesee,	Potter.
W. B. Potter,	Austin,	Potter.
N. W. Church,	Ulysses,	Potter.
E. H. Ashcraft,	Condersport,	Potter.
Jas. T. Hurd,	Galeton,	Potter.
N. W. Church,	Ulysses,	Potter.
E. U. Jones,	Ulysses,	Potter.
Ross Jones,	Condersport,	Potter.
W. B. Potter,	Austin,	Potter.
Wm. Howe,	Shingle House,	Potter.
F. G. Reese,	Condersport,	Potter.
Geo. C. Reese,	Costello,	Potter.
W. H. Squires,	Roulette,	Potter.
L. C. Rohnfroid,	Auburn,	Schuylkill.
E. H. Maurer,	Ashland,	Schuylkill.
J. G. McCarl,	Minersville,	Schuylkill.
E. P. O'Donnell,	Heckschersville,	Schuylkill.
J. L. Hoffman,	Ashland,	Schuylkill.
J. F. Bryson,	Girardville,	Schuylkill.
Dr. McCutcheon,	Gordon,	Schuylkill.
J. J. Dabey,	McAdoo,	Schuylkill.
Jas. A. Lessig,	Schuylkill Haven,	Schuylkill.
John Curren,	Middleport,	Schuylkill.
Jos. Warner,	Pottsville,	Schuylkill.
L. T. Kennedy,	Pottsville,	Schuylkill.
C. W. Wadlinger,	Port Carbon,	Schuylkill.
F. J. Walters,	Pine Grove,	Schuylkill.
H. P. Hoss,	Pine Grove,	Schuylkill.
D. W. Morgan,	Auburn,	Schuylkill.
Geo. Harding,	Tamaqua,	Schuylkill.
John Rhoades,	Ringtown,	Schuylkill.
J. E. Anshamety,	Tamaqua,	Schuylkill.
D. J. Roderick,	Maryd,	Schuylkill.
J. Wm. Schultze,	Tremont,	Schuylkill.
L. D. Hein,	Schuylkill Haven,	Schuylkill.
H. H. Stewart,	Friedensburg,	Schuylkill.
E. E. Weisner,	Tamaqua R. D.,	Schuylkill.
D. A. Lebo,	Valley View,	Schuylkill.
H. F. Wagonmiller,	Selinsgrove,	Snyder.
F. J. Wagonmiller,	Selinsgrove,	Snyder.

SCHOOL MEDICAL INSPECTORS—Cont'd.

Name.	Address.	County.
Jno. Gorman,	Berlin,	Somerset.
A. M. Uphouse,	Hooversville,	Somerset.
F. A. Sass,	Sand Patch,	Somerset.
C. P. Large,	Meyersdale,	Somerset.
E. H. Lowe,	Ashtola,	Somerset.
A. M. Lichty,	Elklick,	Somerset.
T. M. Jacobs,	Somerfield,	Somerset.
H. I. Marsden,	Somerset,	Somerset.
J. L. Christian, (assisted by W. P. Randall),	Lopez,	Sullivan.
W. B. Beaumont,	W. Auburn,	Susquehanna.
A. J. Alney,	Brooklyn,	Susquehanna.
E. L. Hendrick,	Friendsville,	Susquehanna.
G. A. Fike, .....	.....	Susquehanna.
A. S. Blair,	Hallstead,	Susquehanna.
S. Birdsall,	Susquehanna,	Susquehanna.
A. L. Craft,	Herrick,	Susquehanna.
A. J. Taylor, .....	.....	Susquehanna.
D. W. Cole,	Jackson,	Susquehanna.
W. W. Preston,	Montrose,	Susquehanna.
A. E. Snyder,	New Milford,	Susquehanna.
Frank Mastiu,	Westfield,	Tioga.
N. W. Mastiu,	Wellsboro,	Tioga.
S. A. Gastill,	Covington,	Tioga.
C. C. Gentry,	Antrim,	Tioga.
Hiram Z. Frisbie,	Elkland,	Tioga.
Bert Phillips,	Nelson,	Tioga.
J. R. Davies,	Blossburg,	Tioga.
H. W. Howland,	Gaines,	Tioga.
G. A. Smith,	Liberty,	Tioga.
Edith Flower Wheeler,	Mansfield,	Tioga.
F. G. Elliott,	Mansfield,	Tioga.
I. H. White,	Morris,	Tioga.
H. W. Knight,	Rutland,	Tioga.
F. H. Shaw,	Wellsboro,	Tioga.
S. P. Hakes,	Tioga,	Tioga.
C. W. Webb,	Wellsboro,	Tioga.
J. P. Longwell,	Wellsboro,	Tioga.
O. W. H. Glover,	Laurelton,	Union.
Chas. H. Dimm,	Mifflinburg,	Union.
N. L. Focht,	Lewisburg,	Union.
Chas. A. Guudy,	Lewisburg,	Union.
Harry Hatch,	Pleasantville,	Venango.
C. W. Dille,	Cooperstown,	Venango.
F. W. McClelland,	Utica,	Venango.
Geo. Siggins,	Venus,	Venango.
C. P. Snyder,	Polk,	Venango.
Dr. Lamb,	Rouseville,	Venango.
J. E. Taylor,	Rockland,	Venango.
H. T. McDowell,	Franklin,	Venango.
John F. Davis,	Oil City,	Venango.
Dr. Meals,	Columbus,	Warren.
C. C. Flatt,	Corydon,	Warren.
E. S. Griggs,	Tidioute,	Warren.
D. H. Keller,	Russell,	Warren.
W. H. Shortt,	Youngsville,	Warren.
L. D. Paige,	Spring Creek,	Warren.
J. C. Nesbett,	Burgettstown,	Washington.
A. E. Thompson,	Washington,	Washington.
W. C. Martin,	California,	Washington.
A. L. Raulon,	Canonsburg,	Washington.
E. H. Black,	W. Brownsville R. D.,	Washington.
H. J. Kirby,	Cokeburg,	Washington.
Ewing L. Collier,	Roscoe,	Washington.
E. E. French,	Ellsworth,	Washington.
J. A. McCracken,	Florence,	Washington.
A. L. Russell,	Midway,	Washington.
J. M. Timmins,	W. Alexander,	Washington.
Arno C. Voight,	Hawley,	Wayne.
Geo. Merriman,	Lake Como,	Wayne.
E. B. Gavitt,	White Mills,	Wayne.
Dr. Ansley,	Saltsburg,	Westmoreland.
E. H. Graham,	Stahlstown,	Westmoreland.
James Flisch,	Delmont,	Westmoreland.
W. W. Leech,	Apollo,	Westmoreland.
A. J. Beazer,	New Kensington,	Westmoreland.
J. R. Jack,	New Alexandria,	Westmoreland.

SCHOOL MEDICAL INSPECTORS—Cont'd.

Name.	Address.	County.
I. M. Porter,	Greensburg,	Westmoreland.
D. O. Told,	Trafford,	Westmoreland.
J. Q. Robinson,	W. Newton,	Westmoreland.
H. L. McKown,	Tunkhannock,	Wyoming.
Geo. M. Kimer,	Mehoopany,	Wyoming.
Geo. H. Hauch,	Noxen,	Wyoming.
W. A. Yeagy,	Dillsburg,	York.
J. C. Murphy,	York,	York.
W. L. Crawford,	Dillsburg,	York.
C. J. Hamme,	Dover,	York.
J. Mont Curran,	Felton R. D.,	York.
Benj. Hoover,	Wrightsville,	York.
H. C. Hetrick,	Lewisberry,	York.
B. F. Parker,	Glen Rock,	York.
L. H. Sterner,	Porters Sideling,	York.
Frank Horning,	Hellam,	York.
Elmer Strombough,	Thomasville,	York.
J. R. Brodbeck,	Cordorus,	York.
Jas. C. May,	Manchester,	York.
H. David Smyser,	York,	York.
H. W. Zech,	York,	York.
E. E. Phillips,	ly,	York.
G. W. Bahn,	Spring Grove,	York.
W. H. McCurdy,	Delta,	York.
A. C. Wentz,	Hanover,	York.
G. M. Fickes,	Seven Valley,	York.
B. F. Parker,	York,	York.
C. G. Hildebrand,	Yoganville,	York.
A. C. Hetrick,	Wellsville,	York.
J. F. Norris,	Hanover R. D.,	York.
W. H. Horning,	York,	York.
Geo. N. Yagle,	Red Lion,	York.
J. M. Hyson,	Red Lion,	York.
Chas. Eisenhower,	York,	York.
J. C. Murphy,	York Haven,	York.

BUREAU OF VITAL STATISTICS.

State Registrar, Wilmer R. Batt, M. D.
Philadelphia.

Chief Clerk, Elmer W. Ehler, Harrisburg, Dauphin County.

Classification Clerk, William H. Briggs, Folsom, Delaware County.

Returns Clerk, Elijah B. Jenkins, Tower City, Schuylkill County.

Stenographers—Miss Erma K. Longenecker, Middletown, Dauphin County.

Miss Lila H. Connelly, Carlisle, Cumberland County.

Mrs. Caroline S. Sprenger, Cressona, Schuylkill County.

Miss Anna Magdeberg, Ashland, Schuylkill County.

Miss Grace E. Montelle, Wormleysburg, Cumberland County.

Miss Winifred Beckley, Catawissa, Columbia County.

Miss Celia Conrad, Johnstown, Cambria County.

Clerks—Mrs. Edith L. Huber, Harrisburg, Dauphin County.

Miss Martha E. McGranahan, Harrisburg, Dauphin County.

Miss Marie E. McCalley, Harrisburg, Dauphin County.

Miss Martha M. Zeigler, Harrisburg, Dauphin County.

Miss Theresa Neupert, Lewistown, Mifflin County.

Inspector,—R. J. Brauner, Carlisle, Cumberland County.

MARRIAGE AND MORBIDITY STATISTICS DIVISION.

Supervisor, Wilmer R. Batt, M. D.,
Philadelphia.

Clerks—Miss Emilie N. Charteris, Norristown, Montgomery County.

Miss Margaret R. Rooney, Renovo, Clinton County.

Mrs. Amy Brown, Harrisburg, Dauphin County.

Mrs. Daisy H. Kuhn, Johnstown, Cambria County.
 Miss Fannie McCamant, Harrisburg, Dauphin County.
 Miss Mary C. Kulp, Millintown, Juniata County.
 Miss Carrie Trego Tunis, Harrisburg, Dauphin County.
 Miss Helen Sloat, Harrisburg, Dauphin County.
 Herbert D. Harry, Harrisburg, Dauphin County.
 Charles N. Fry, Harrisburg, Dauphin County.

LABORATORIES AND EXPERIMENTAL STATIONS.

*Chief of Laboratories—*Herbert Fox, M. D.,*
 Philadelphia.

**D. H. Bergey, M. D., Philadelphia.*

S. H. Gilliland, M. D., Marietta, Lancaster County.

Bacteriologist—James B. Rucker, M. D., Lansdowne, Delaware County.

Technical Assistants—Alexander Garcia, Philadelphia.

**Harold MacAskie, Scranton, Lackawanna County.*

J. Moore Campbell, M. D., Philadelphia.

Stenographers—Miss Marie Stella Krause, Philadelphia.

Miss Estelle L. Hecht, Philadelphia.

Miss Helen M. O'Donnell,

Clerks—Miss Mary Eva Andress, Philadelphia.

Miss Amy E. Engelbert, Philadelphia.

Miss Marguerite C. Roddy, Philadelphia.

**Miss Lucy H. Irwin,*

Helpers—Leon Harris, Philadelphia.

Calvin F. Harris, Philadelphia.

Lewis Brown,

Andrew Keenan, Philadelphia.

**Timothy Quilan, Bryn Mawr, Montgomery Co.*

DIVISION FOR THE CONTROL OF TUBERCULOSIS.

PENNSYLVANIA STATE SOUTH MOUNTAIN SANATORIUM FOR TUBERCULOSIS.

MEDICAL AND NURSING STAFF AND EMPLOYEES.

Fred C. Johnson, M. D., Medical Director,
 McKean County.

**Benjamin Swayne Putts, M. D., Deputy Medical Director, Pittsburgh, Allegheny County.*

Assistant Physicians.

John Berry, M. D., Philadelphia.

Chester G. Crist, M. D., Philadelphia.

L. A. Heikes, M. D., Dillsburg, York County.

**F. C. Hyatt, M. D., Philadelphia.*

Arthur F. Jackson, M. D., Philadelphia.

**Carl E. Koenig, M. D., Pittsburgh.*

J. P. Marshall, M. D., Womelsdorf, Berks County.

**F. P. McCarthy, Oil City, Venango County.*

**F. B. E. Miller, M. D., Philadelphia.*

H. E. Orndorff, M. D., Philadelphia.

S. H. Rinehardt, M. D., Washington, Washington County.

Benjamin Robinson, M. D., Blair County.

Henry A. Gorman, M. D., Philadelphia.

A. Trumper, M. D., Bacteriologist, Philadelphia.

**Miss Addah Strouse, Head Nurse, Philadelphia.*

.Matrons.

Miss Maud Emery, Clinton County.

Mrs. Annie M. Klee, Franklin County.

Mrs. Annie Yeager, Assistant Matron, Franklin Co.

Superintendent

*Wilson Reynolds, Franklin County.

Fred Palser, Master Mechanic, Philadelphia.

Arthur Yeager, Asst. Master Mechanic, Franklin County.

Louis Sorg, Steward, Philadelphia.

Nurses.

*Minnie Adams.
 *Caroline Ames.
 Frances M. Black.
 Miriam Bostic.
 *Clara L. Campbell.
 *Mary Clarke.
 Anna Cummings.
 Ida K. Deeds.
 *Rose A. Dorian.
 Mary S. Eckhardt.
 Carrie E. Eppley.
 Nellie Foster.
 *Winifred Gallagher.
 Louise K. Gibbons.
 *Josephine Goddard.
 *Anetta B. Hafer.
 *Anna L. Hart.
 Kathryn Halligan.
 Caroline Hall.
 Mary H. Hallock.
 Margaret Heslin.
 *Emma Ibbetson.
 *Viola L. Kennedy.
 *Rachel Keller.
 Marie Kennedy.
 *Florence Laskowski.
 Anne E. Lay.
 Maude L. Leffler.

Mary Long.
 Mary E. Lyons.
 *Minerva E. Maxwell.
 Minnie V. McGee.
 Alice K. McKernan.
 Elizabeth McMahon.
 Ella M. McKeon.
 Ethel Miller.
 Annie M. Morgan.
 Elizabeth Moffett.
 Sue Naysmith.
 Lillian Pettingill.
 *Nellie M. Purcell.
 *Eleanore Risso.
 Hannah Romberger.
 *Della Schollenberger.
 Caroline E. Shay.
 Mary Silk.
 *Mary L. Snell.
 Susan Stewart.
 Nellie M. Tidd.
 Tusanna Walker.
 Ada Walhay.
 Florence M. Weldie.
 *Selina Wilder.
 *Sarah Zimmerman.
 *Pauline A. Zwikel.

Laundresses.

Lucy Thompson, Head Laundress.

*Polly Baker.
 *Susan Baker.
 *Ethel Baker.
 *Pearl Baker.
 Lillian Boswell.
 Mabel Bobb.
 Daisy Carbaugh.
 Blanche Carbaugh.
 *Lizzie Carbaugh.
 Edith Carbaugh.
 *Mabel Carbaugh.
 Rebecca Carbaugh.
 Edna Carbaugh.
 Alma Carbaugh.
 Dora Carbaugh.
 Emma Carbaugh.
 Catherine Carbaugh.
 *Ella Condo.
 *Mrs. A. Cullison.
 *Annie Dinkilberger.
 Elizabeth Fralick.
 *Mary Gilbert.
 *Mary Hoover.
 *Helen Kahle.
 *Blanche Manly.
 *Mrs. K. R. McCleaster.
 *Edna Mell.
 *Myrtle Moody.

Elsie Naugle.
 *Grace Ramsey.
 Mary Ransey.
 *Anna Rock.
 Rosie Rodgers.
 *Ruth Sulhamer.
 *Lulu Sheppard
 Ida Strang.

*Margaret Toner.
 *Minnie Wagaman.
 Zella Wagaman.
 Addie Wagaman.
 Anna Ware.
 Lottie Weaver.
 *Irene Zungst.

Waitresses.

*Mildred Anderson.
 *Mary Baker.
 Carrie Barnes.
 Floy Baltozer.
 *Mary Barnes.
 Ida Barnes .
 *Bertha Berg.
 *Florence Berg.
 Eva Bitner.
 Sadie A. Bibby.
 *Emma Bolton.
 *Gertrude Bolin.
 *Theresa Boyle.
 *Alberta Bushey.
 *Marie Burkey.
 Sadie Bumbaugh.
 Annie Bumbaugh.
 *Elizabeth Buchart.
 *Ruth Cook.
 Maude Cornman.
 Ida Cornman.
 *Mame Cool.
 *Mary Coyle.
 Carrie Cox.
 Cornelia Dencler.
 *Wilda Dittenhofer.
 Eleanor Douglas.
 *Sara Dunbar.
 Virgie Dull.
 *Gertrude Floyd.
 Rebecca Flick.
 Anna Foster.
 *Florence Freed.
 Anna Funk.
 *Edna Garber.
 *Mary Gerdes.
 Mary Hall.
 Hetty Henry.
 *Lillian Humphrey.
 *Violet Humphrey.
 *Minnie Humes.
 *Alberta Irvin.
 *Goldean Jacoby.
 Bernadene Jacoby.
 Mary Kaehler.
 Maggie Kerr.

Annie Keeports.
 Ethel Killian.
 *Louise Kiner.
 Lydia Keeffer.
 Ivy Knouse.
 Annie Knouse.
 Ellen Landis.
 Anna Leathery.
 *Florence Martin.
 Fleda Martin.
 Ruth Martin.
 Rosa May.
 *Katherine McCann.
 Mary McMackin.
 Nellie McCann.
 Rose McDermitt.
 Stella McManus.
 Edna McWilliam.
 Myrtle McCleary.
 Josephine McDermitt
 Jennie McKinsey.
 Cora Miller.
 Carolyn Miller.
 *Dora Miller.
 *Florence Miller.
 Vera Morehead.
 Laura Morehead.
 *Jessie Ogden.
 Edythe Patterson.
 Helen M. Ricker.
 *Lizzie Ritz.
 *Ruth Rider.
 Florence Robinson
 Flo Rosenberger.
 *Clara Rupp.
 *Elizabeth Sacks.
 *Grace Smith.
 *Annie Sorg.
 *Lulu Sorg.
 Margaret Spurrier.
 *Alva Stoops.
 *Mary Steinberger.
 *Lillian Stout.
 Helen Strickler.

Grace Steinberger.
 *Carrie Summy.
 *Mary Sweeney.
 *Anna Taylor.
 *Annie Tomlinson.
 Clara Verdier.

Beryl Warren.
 Mary A. Ware.
 Edith Wells.
 *Helen Wingert.
 *Margaret Woods.
 *Alice Wright.

Orderlies.

*Harry Arndt.
 Edward Bollinger.
 Charles Boyd.
 *Joseph Burns.
 William J. Campbell.
 *William Davin.
 Ben Davis.
 *Edgar Day.
 William B. Daly.
 James Duffy.
 Gus Elsesser.
 Nathan Empole.
 John C. Frasch.
 Daniel Gallagher.
 *George W. Gehret.
 Francis J. Gutzsell.
 Eber Hampton.
 *John J. Hetzler.
 Ludwig Heyman.
 Carl H. Horn.
 *Alexander W. Jeffries.
 *Edward J. Keeley.
 *Grover Kite.
 Carl Kline.

*Tony Konestie.
 Stewart Lammie.
 LaVerne Lowry.
 Charles Lynch.
 *James H. Lyons.
 William McIntyre.
 *Edmund McNally.
 Elmer Morehead.
 *Chas. W. Moore.
 *George Moffett.
 John D. Mullen.
 *James H. Payran.
 Anton Perniche.
 *Joseph Quimby.
 *George Reitner.
 Carl H. A. Rixen.
 Fred E. Rice.
 *Harry Saylor.
 *Alfred W. Seeley.
 *John W. Smith.
 Arnold Strub.
 *John Walsh.
 *John Welsh.
 John F. Whitney.
 *John H. Woods.

Wardmaids.

Esther Boscia.
 Martha Butler.
 Elizabeth Cannon.
 Hannah Davies.
 Mary Dank.
 Eloise Donia.
 Mary Dwyer.
 Evelyn Ewing.
 *Mildred Fitzpatrick.
 Jennie Finerman.
 Nellie Flynn.
 *Rebecca Gilliland.
 Bertha E. Graf.
 Anna Hardicke.
 Florence Haberstroh.

Kathryn Hofsky.
 Kathryn Junkin.
 Nellie Kemerer.
 Katherine Kelly.
 *Erma Kolp.
 *Agnes Ludwig.
 *Ruth Mason.
 May McBride.
 Katherine Nickel.
 Martha Sewell.
 *Martha Slaughter.
 *Ruth Sprow.
 *Margaret Still.
 *Matilda Tynell.
 *Anna Wampler.

Scrubbers.

Mary Bas.
 *Anna Brucekolty.
 Mary Dank.
 Anna Djis.
 *Selka Flalkivic.

Effie Hoeba.
 Marja Huatnik.
 *Mary Kahler.
 *Kyjda Kranosluka.
 Gelka Krasnoslika.

Anna Gazda.
 Mary Glesin.
 Ella Good.
 Anna Gozda.
 Kyjda Gluska.
 Gelka Halkivie.

Mina Krasnoslika.
 Eva Panaszig.
 Annie Skulska.
 Olka Synotuck.
 Laura Weaver.

Cooks.

William Beitzel, Chef at Hospital.
 Clarence Bliss, Chef at Main Dining Room.
 Gus Gramozi, Chef at Main Dining Room.
 *Harry Hall, Chef at Main Dining Room.
 *Geo. W. Manio, Chef at Main Dining Room.
 Edwin Miller, Chef at Main Dining Room.
 Sarah Bishop,

DISPENSARIES.

Medical Inspector of Dispensaries, Thomas H. A. Stites, M. D.,
 Scranton, Lackawanna County.

Lecturer and Manager of Tuberculosis Exhibit—Wm. C. Miller, M. D., Bedford,
 Bedford County.

*John A. Bouse, M. D., Chambers-
 burg, Franklin County.

Statistician—Percival Herman, M. D., Kratzerville, Snyder County.

Visiting Dispensary Nurse—Miss Alice O'Halloran, Philadelphia.

Assistant Visiting Dispensary Nurse—Miss Katherine Gillespie, Philadelphia.

Chief Clerk—*George K. Strode, West Chester, Chester County.

Samuel S. Long, York, York County.

Stenographers—Miss Olive Jamison, Ingram, Allegheny County.

Miss Margaret Prescott, Matamoras, Pike County.

*Miss Josephine Hill, Williamsport, Lycoming County.

Clerks—Mrs. Linnie K. Hiester, Harrisburg, Dauphin County.

Miss Anna M. Hartley, Bloomsburg, Columbia County.

Miss Sara C. Dickinson, Steelton, Dauphin County.

*Miss Mary E. Fitzpatrick, Harrisburg, Dauphin County.

Assistant to the Manager of Tuberculosis Exhibit—*Chas. E. Middleton, Bedford,
 Bedford County.

W. M. Colvin, Bedford, Bed-
 ford County.

*Retired.

LOCATION AND STAFF OF EACH DISPENSARY.

County.	Place.	Physicians.	Nurses.
Adams,	Gettysburg,	†Dr. J. R. Dickson,	*Miss Florence Matthews.
Allegheny,	Braddock,	†Dr. F. K. Whitfield,	*Miss Lola A. Fleumer.
	Carnegie,	†Dr. F. E. Heriott,	*Miss Alice Hyland.
	Homestead,	†Dr. A. P. Fogelman,	*Miss Ellen Sidwell.
	McKeesport,	†Dr. D. P. Blose,	*Miss Alice Hyland.
		Dr. W. H. Leffler,	*Miss Ellen Sidwell.
	Pittsburgh,	†Dr. S. M. Rinehart,	Miss Belle Beattie.
		Dr. J. F. Edwards,	Miss N. C. Negler.
		Dr. F. Stolzenbach,	Miss Flora Grauch.
		Dr. C. W. Sample,	Miss Laura Moyes.
		Dr. G. H. Boyd,	Miss Laurena Boyd.
		Dr. I. H. Alexander,	*Miss Alice Kuhn.
		Dr. S. Hamilton,	
		Dr. W. B. Shephard,	
		Dr. N. H. Clark,	
		Dr. J. H. McCreery,	
	Tarentum,	†Dr. J. Mackrell,	
		†Dr. W. A. Arnold,	§Miss Annette Bricker.
	Wilkesburg,	†Dr. J. M. McNall,	*Miss Elsie B. Hatfield.
Armstrong,	Kittanning,	†Dr. T. N. McKee,	Miss Gertrude Hall.
		Dr. L. D. Allison,	Miss Viola C. Lawson.
Beaver,	Beaver Falls,	†*Dr. Bruce Snodgrass,	*Miss Alice M. Nicely.
	Rochester,	†*Dr. Boyd B. Snodgrass,	*Miss Alice M. Nicely.
Bedford,	Everett,	†Dr. W. de la M. Hill,	*Miss Mary Sullivan.
Berks,	Reading,	†Dr. Israel Cleaver,	*Mrs. M. R. Green.
		Dr. W. M. Bertolet,	*Miss A. M. Lafferty.
		Dr. F. Colletti,	
		Dr. J. L. Wagner,	
Blair,	Altoona,	†Dr. H. Mullenberg,	Miss I. Mae Wharton.
		†Dr. J. D. Findley,	
		Dr. E. B. Miller,	
	Tyrone,	†Dr. W. S. Musser,	*Miss K. Sprankle.
Bradford,	Towanda,	†Dr. T. B. Johnson, Jr.,	*Miss F. A. Rooker.
Bucks,	Bristol,	†Dr. J. de B. Abbott,	Miss L. Gillick.
	Doylestown,	†Dr. I. S. Plymire,	*Miss E. Hilbert.
Butler,	Butler,	†Dr. H. D. Hockenberry,	Miss L. M. Soper.
		†Dr. T. M. Maxwell,	
		Dr. H. P. St. Clair,	
Cambria,	Hastings,	†Dr. D. S. Rice,	Mrs. R. W. Easby.
		†Dr. W. M. Johnston,	
	Johnstown,	†Dr. W. E. Matthews,	Miss K. Hughes.
		Dr. J. McAnany,	Miss A. Sullivan.
		Dr. H. F. Thomb,	
		Dr. C. M. Harris,	
Cameron,	Emporium,	†Dr. H. S. Falk,	
Carbon,	Lansford,	†Dr. G. P. Hill,	
	Mauch Chunk, ..	†Dr. E. G. Bray,	*Miss Ada Reibe.
			*Miss Mary L. Jenkins.
Centre,	Bellefonte,	††Dr. G. F. Harris,	*Miss Anna L. Hart.
	Phillipsburg,	†Dr. C. E. McGirk,	*Miss K. Sprankle.
	Coatesville,	†Dr. E. A. Graves,	Miss M. Stevenson.
Chester,	Phoenixville,	†Dr. C. A. Yocum,	Miss Ruth Paxson.
			*Miss May Engle.
			*Miss A. M. Lafferty.
	West Chester, ..	†Dr. J. Scattergood,	*Miss Gertrude Raup.
Clarion,	Clarion,	†Dr. J. T. Rimer,	*Miss Gertrude Raup.
Clearfield,	Clearfield,	†Dr. J. C. Stewart,	*Miss Nettie Campbell.
	DuBois,	†Dr. K. R. Jordan,	Miss Elizabeth Williams.
Clinton,	Lock Haven,	†Dr. R. B. Watson,	Miss Sarah Dunsmore.
	Renovo,	†Dr. C. L. Fullmer,	*Miss Edith Bottorf.
Columbia,	Berwick,	†Dr. S. B. Arment,	*Miss Edith Bottorf.
	Bloomsburg,	†Dr. S. B. Arment,	Miss Retta Follmer.
Crawford,	Meadville,	†Dr. J. K. Roberts,	*Miss Retta Follmer.
		Dr. W. E. Hyskell,	Miss Margaret McMahon.
	Titusville,	†Dr. C. E. Spicer,	
Cumberland,	Carlisle,	†Dr. H. B. Bashore,	*Miss E. Laufenberger.
		Dr. E. R. Plank,	Miss L. Shellenberger.
	West Fairview, ..	†Dr. H. B. Bashore,	
Dauphin, ..	Harrisburg,	†Dr. P. A. Hartman,	*Miss Shellenberger.
		Dr. C. R. Phillips,	Miss Sara Butler.
		Dr. A. L. Shearer,	*Mrs. Katharine Wells.
		Dr. W. T. Douglas,	Miss Roth.
		Dr. H. A. Farnsler,	Miss Jessie McClure.
		Dr. C. E. L. Keene,	Miss Blanche Yowler.
		Dr. C. J. B. Flowers,	§Miss Anna Kuhnast.
		Dr. W. J. McMullen,	Miss Anna Kutzler.
			Miss Bertha Brown.
	Lykens,	†Dr. M. D. Lehr,	§Miss Elsie Hatfield.
Delaware,	Chester,	†Dr. H. M. Miller,	Dr. J. A. Keiter.
		Dr. J. W. Wood,	Miss Julia Dalton.
		Dr. M. A. Neufeld,	Miss K. Donnelly.
Elk,	Ridgway,	†Dr. J. G. Flynn,	Mrs. K. Worthington.
			*Miss Sara Dunsmore.

County.	Place.	Physicians.	Nurses.
Erie,	Corry,	†Dr. C. B. Kibler,	Mrs. L. W. Merriman.
	Erie,	†Dr. J. W. Wright,	Miss E. M. Hartlieb.
		Dr. A. H. Roth,	Miss Alice McQuade.
Fayette,	Brownsville,	†Dr. L. N. Reichard,	*Miss Flora Wilson.
	Connellsville,	†Dr. T. B. Echard,	*Miss Mary Allen.
	Uniontown,	†Dr. O. R. Altman,	*Miss Mary Allen.
Forest,	Tionesta,	†Dr. F. J. Bovard,	*Miss E. Lauffenberger.
Franklin,	Chambersburg,	†Dr. H. X. Bonbrake,	*Miss F. Matthews.
	Waynesboro,	†Dr. W. C. Schultz,	
Fulton,	McConnellsburg,	†Dr. J. W. Mosser,	
Greene,	Waynesburg,	†Dr. J. T. Iams,	*Miss Jennie Riles.
Huntingdon,	Huntingdon,	†Dr. H. C. Frontz,	*Miss Julia Black.
Indiana,	Indiana,	†Dr. W. A. Simpson,	*Miss Jessie Barclay.
Jefferson,	Brookville,	†Dr. J. A. Haven,	*Miss Jessie Barclay.
	Punxsutawney,	†Dr. S. M. Beyer,	*Miss Jessie Barclay.
		†Dr. W. H. Banks,	
Juniata,	Mifflintown,	Dr. I. G. Headings,	Miss Elsa Auker.
Lackawanna,	Carbondale,	†Dr. W. J. Lowry,	Miss Margaret Davis.
	Scranton,	Dr. J. C. Reifsnyder,	Miss Reba Tucker.
		Dr. C. Folkowsky,	Miss L. Rosengrant.
		Dr. Joseph Wagner,	
Lancaster,	Lancaster,	†Dr. J. L. Mowery,	Miss Clara Henrich.
		Dr. H. F. Myers,	*Miss Elizabeth Snyder.
		Dr. H. C. Kinzer,	
	Columbia,	†Dr. J. P. Kennedy,	*Miss Elizabeth Snyder.
Lawrence,	New Castle,	†Dr. J. D. Moore,	Miss Kathryn Shepard.
		Dr. J. D. Tucker,	[Miss E. McMamara.
		Dr. R. G. Niles,	
Lebanon,	Lebanon,	†Dr. A. J. Riegel,	
Lehigh,	Allentown,	Dr. H. E. Maulfair,	Miss E. I. Peters.
		†Dr. M. F. Cawley,	
		Dr. W. D. Kline,	Dr. J. T. Butz.
		Dr. F. C. Bausch,	* Miss M. Houston.
Luzerne,	Hazleton,	†Dr. W. C. Gayley,	* Miss M. L. Jenkins.
		Dr. W. L. Hutchinson,	*Miss Anna Hart.
		Dr. J. W. Leckie,	Miss Marion Good.
	Nanticoke,	†Dr. C. E. Bennet,	
	Pittston,	Dr. S. L. Underwood,	
		*[Dr. M. C. Gaughan,	Miss Bertha E. Morgan.
		Dr. H. L. Ransom,	Miss Mary Maloney.
	Wilkes-Barre,	*Dr. C. H. Miner,	* Miss M. Reynolds.
		Dr. J. W. Geist,	*Miss J. L. Ross.
		Dr. S. Reichard,	Miss E. G. Jones.
		Dr. S. D. Wyckoff,	Mrs. E. Silvera.
		Dr. C. W. Carr,	Miss Emma Blackwell.
		Dr. W. Davis,	Miss M. B. Gilbert.
		Dr. R. L. Wadham,	Miss Martha James.
		Dr. J. Williams,	Miss E. H. Lewis.
		Dr. G. H. McConnon,	Miss L. Tucker.
		*[Dr. Malcolm Guthrie,	
Lycoming,	Williamsport, ...	†Dr. C. W. Youngman,	
		Dr. R. F. Trainer,	
McKean,	Bradford,	†Dr. W. C. Hogan,	Miss Anna Gorman.
	Kane,	†Dr. M. J. Sweeney,	Miss Jennie Simmons.
Mercer,	Sharon,	†Dr. P. P. Fisher,	
Mifflin,	Lewistown,	†Dr. C. H. Brisbin,	*Miss E. Lauffenberger.
Monroe,	Stroudsburg,	*Dr. W. L. Angle,	Miss Emma Watts.
Montgomery,	Jenkintown,	†Dr. W. B. Jameson,	Miss E. L. Felker.
	Norristown,	†Dr. H. H. Whitcomb,	*Mrs. Jane P. Miller.
		Dr. C. H. Mann,	*Miss E. Hilkert.
	Pottstown,	†Dr. T. E. Wills,	*Miss M. B. Cornell.
Montour,	Danville,	†Dr. G. A. Stock,	* Miss Mae Engle.
			* Miss Anna Lefferty.
Northampton,	Bangor,	†Dr. H. S. Sherrer,	*Miss Margaret Shade.
	Easton,	Dr. E. M. Green,	*Miss M. G. Connelly.
		Dr. T. C. Zulick,	*Mrs. Jane P. Miller.
		Dr. W. P. Thomason,	Miss Margaret Houston.
		Dr. W. H. McIlhane,	
		Dr. J. Fretz,	
		Dr. J. J. Quiney,	
	S. Bethlehem, ..	Dr. W. G. Tillman,	Miss Ida Durkin.
		†Dr. W. L. Estes,	
		Dr. W. D. Chase,	
Northumberland, .	Milton,	†Dr. R. B. Tule,	Miss Sara Smith.
	Mt. Carmel,	†Dr. W. T. Williams,	Miss M. Valentine.
		Dr. T. L. Williams,	
	Shamokin,	†Dr. R. H. Simmons,	Miss Eva Rebuck.
		Dr. C. H. Malone,	
	Sunbury,	†Dr. J. E. Cressinger,	Miss Anna Hileman.
Perry,	New Bloomfield, ..	†Dr. A. R. Johnston,	
Philadelphia,	Frankford,	†Dr. W. G. Turnbull,	Miss Effie M. Heeney.
		Dr. E. J. Murphy,	Miss F. Phillips.
		Dr. F. A. Murphy,	
	Philadelphia,	†Dr. A. P. Francine,	Miss Alice Phillips.
		Dr. W. G. Turnbull,	Miss Margaret Flynn.
		Dr. J. C. Foltz,	Miss Ida M. Swartz.

County.	Place.	Physicians.	Nurses.
Pike,	Milford,	Dr. Annie Turner,	Miss Hayes.
Potter,	Coudersport,	Dr. S. A. Munford,	
Schuylkill,	Pottsville,	Dr. R. G. Torrey,	
		Dr. Karl Shaffle,	
		Dr. S. J. Repplier,	
		Dr. B. L. Singer,	
		Dr. H. Parrish,	
		Dr. Charles Webber,	
		†Dr. W. B. Kenworthy,	
		†Dr. E. H. Ashcraft,	
		†Dr. L. T. Kennedy,	*Miss Grace Kantner.
		Dr. C. H. Boyer,	Miss A. Schwarze.
	Shenandoah,	Dr. O. J. Carlin,	
		†Dr. H. M. Wasley,	Miss Grace Kantner.
		Dr. D. L. Price,	Miss Annie Bartsch.
		*†Dr. J. C. Gallagher,	Miss V. D. Kazakevich.
	Tamaqua,	†Dr. E. Shifferstine,	*Miss Ada Riebe.
Snyder,	Selinsgrove,	†Dr. F. J. Wagenseller,	* Miss Margaret Shade.
			*Miss M. G. Connelly.
Somerset,	Myersdale,	†Dr. C. P. Large,	*Miss Mary Sullivan.
Sullivan,	Dushore,	*Dr. P. G. Biddle,	*Miss F. A. Rooker.
Susquehanna,	Montrose,	†Dr. J. G. Wilson,	*Miss C. VanAuken.
	Susquehanna,	†Dr. S. M. Birdsall,	*Miss C. VanAuken.
Tioga,	Tioga,	†Dr. S. P. Hakes,	*Mrs. Angie Benson.
	Wellsboro,	†Dr. P. W. Houser,	*Mrs. Angie Benson.
Union,	Mifflinburg,	†Dr. C. H. Dimm,	*Miss Sara Smith.
Venango,	Franklin,	*Dr. H. F. McDowell,	Miss May Richards.
	Oil City,	†Dr. J. P. Strayer,	*Miss Rose Laughton.
			*Miss M. E. Birchard.
			Miss Birdena Ross.
			Miss Anna Grafe.
Warren,	Warren,	† Dr. M. V. Ball,	*Miss E. Lauffenberger.
Washington,	Monongahela,	†Dr. C. W. Schmehl,	
	Washington,	†Dr. C. B. Wood,	*Miss Flora Wilson.
		†Dr. E. M. Hazlett,	Miss Angeline White.
Wayne,	Honesdale,	†Dr. H. B. Ely,	*Miss Jennie N. Riles.
Westmoreland,	Greensburg,	†Dr. I. M. Portser,	*Miss Margaret Davis.
	Mt. Pleasant,	†Dr. M. W. Horner,	*Miss Caroline Kline.
	Monessen,	*Dr. M. J. Cramer,	*Miss Caroline Kline.
Wyoming,	Tunkhannock,	†Dr. H. L. McKown,	Miss M. Watson.
			* Miss Matilda Reynolds.
York,	Hanover,	†Dr. J. H. Bittinger,	*Miss Jessie Ross.
		Dr. J. H. Alleman,	Mr. F. Y. Stambaugh.
	York,	†Dr. J. S. Miller,	*Miss A. E. Bricker.
		Dr. Roland Jessop,	Miss Agnes M. Martin.
		*†Dr. J. H. Bennett,	Mrs. Elizabeth Fink.
		Dr. H. D. Smyser,	*Mrs. Nettie Kepple.
		Dr. E. Meisenheider,	Miss Helen Miller.
		Dr. L. M. Hartman,	
		Dr. B. F. Parker,	
		Dr. L. S. Weaver,	
		Dr. B. W. Shirey,	
		Dr. W. C. Smith,	

† Physician in charge.

‡ Resigned.

‡ Died.

* Attached to more than one dispensary.

§ Transferred.

DIVISION OF DISTRIBUTION OF BIOLOGICAL PRODUCTS.

Chief, Henry W. Peirson,
Philadelphia.

Bookkeeper—Mrs. Lucy A. Thompson, Williamsport, Lycoming County.

Stenographer—Miss Mabel E. Thorn, Gettysburg, Adams County.

Clerks—Mrs. Belle M. Weible, Tidioute, Warren County.

Miss Edna M. Knisely, Eberly's Mills, Cumberland County.

DISTRIBUTORS OF DIPHTHERIA ANTITOXIN.

Appointed by Commissioner of Health.

Antitoxin in curative and immunizing doses may be secured by physicians practicing in this Commonwealth upon their agreeing in writing that no charge of any kind is to be made for the Antitoxin, and that the person or persons for whom it is obtained are indigent in the sense that they cannot procure the necessities of life and at the same time purchase Antitoxin, and also that the physician will send to the Department of Health a full clinical report as specified by the Commissioner of Health.

ADAMS COUNTY.

Auker, Edward T., New Oxford.
Buehler, L. M., Gettysburg.
Cashman, Elmer W., York Springs.
Stonesifer, Dr. H. A., Littlestown.

Stover, Dr. J. G., Bendersville.
Trout, Dr. N. G., Fairfield.
Wolff, W. E., Arendtsville.
(Vacancy) East Berlin.

ALLEGHENY COUNTY.

Burns, H. W., Coraopolis.
Covell, S. W., Wilkinsburg.
Chapman, Jos. F., Brackenridge.
Doyle, J. J., Castle Shannon.
Goldsmith's Phar., Tarentum.
Hanna, Frank H., Springdale.
Haymaker, Milo M. & Co., Pitcairn.
Hollander, Jos. M., Braddock.
Hyde, J. W., Millvale.
IteI, Albert I., McKees Rocks.
Johns, John A., Beechview.
Kelley & Glass, Crafton.
Kerr, R. G., Natrona.
McClaran's Phar., Glassport.
Myers, S. D., Sharpsburg.

Paules, J. L., Homestead.
Poorman, H. W., Braddock.
Richards, Geo. W., Duquesne.
Shaffer, P. T. B., Elizabeth.
Shaw, Chas. E., Duquesne.
Southwick, E. P., Clairton.
Sprowl's Pharmacy, Turtle Creek.
Stright, S. A., Swissvale.
Swearingen, W. H., Bellevue.
Thompson, H. M., Carnegie.
Urben, Harry A., Carrick.
Walker's Pres. Phar., McKeesport.
Weyels, W. J., N. Braddock.
Whiteley, W. S., Verona.

ARMSTRONG COUNTY.

Hoover, A. M., Parker's Landing.
McClland Bros., Ford City.
Parks, J. H., Leechburg.
Sharp, J. C. & Co., Dayton.
Sturgeon, W. J., Kittanning.

Valley Drug Store, Rural Valley.
White, John A., Goheenville.
Williams, Jas. E., Freeport.
Wray, Frank T., Apollo.

BEAVER COUNTY.

Aber, O. E., Industry.
 Aliquippa Drug Co., Aliquippa.
 Anderson, W. A., Hookstown.
 Bebout, W. I., Darlington.
 Fitzgerald, Thos., Ambridge.

Gordon, W. T., Rochester.
 Hoffman, W. A., Beaver Falls.
 Kaye, Walter D., Monaca.
 Mayo, Fred H., Beaver.
 Schweppe, H. L., New Brighton.

BEDFORD COUNTY.

Alexander, W. A., Everett.
 Grubb & Weimer, Clearville.
 Hopewell Phar., Hopewell.
 Jordan, F. W., Bedford.
 Rhodes, C. R., Hyndman.

Saxton Drug Store, Saxton.
 Shaffer & Conrad, Osterburg.
 Shoenthal, H. I., New Paris.
 Stayer, Irvin C., Woodbury.
 Tewell, A. L., Chaneyville.

BERKS COUNTY.

Hoffman, N. J., Birdsboro.
 Landis, F. T., Womelsdorf.
 Mayer, Irene F., Boyertown.
 Raser, Wm. H., Reading.

Schomo, C. C., Hamburg.
 Sellers, E. J., Kutztown.
 Werley, C. D., Topton.

BLAIR COUNTY.

Boecking, G. C., Tyrone.
 Davis, W. D., Altoona.
 Grauer, N. A., Bellwood.
 Jacobs, Jno. P., Hollidaysburg.
 Hess, I. C., Duncansville.

Johnson, C. N., Martinsburg.
 Ketring, D. T., Williamsburg.
 Lambert, R. A., Roaring Spring.
 McLanahan, W. H., Tyrone.
 Taylor, C. S., Altoona.

BRADFORD COUNTY.

Allis, I. M., Wyalusing.
 Billings, F. T. & Son, Le Raysville.
 Carpenter & Pierce, Troy.
 Francke, E. O., Athens.
 Jump, H. D., Sayre.
 Kester, E. P., Towanda.

Laquin Lumber Co., Laquin.
 Lomax, F. F., Monroeton.
 Newman, G. Ernest, Canton.
 Passmore, John E., Gillett.
 Wilcox, Ray S., New Albany.

BUCKS COUNTY.

Bassett, Henry Linn, Yardley.
 Cornell, H. H., Newtown.
 Hulshizer, Est. of Martin, Doylestown.
 Johnson, Dr. H. W., Riegelsville.
 Metzler, Oscar L., Sellersville.

Moyer, Howard R., Quakertown.
 Pryor, Frank C., Morrisville.
 Pryor, Wm. B. T., Langhorne.
 Pursell, Howard, Bristol.
 Williams, N. B., Perkaspie.

BUTLER COUNTY.

Bell, S. Earle, Mars.
 Edmonds, A. J., Bruin.
 Hall, Amos, Branchton.
 Hindman, H. C., West Sunbury.
 Maybury, W. J., Slippery Rock.

Mershon, E. B., Saxonburg.
 Redick & Grohman, Butler.
 Sitler, A., Zellenople.
 Thomas, J. D., Evans City.

CAMBRIA COUNTY.

Baird, Mrs. Carrie, Dunlo.
 Berry Drug Co., Johnstown.
 Davis, Cyrus W., Conemaugh.
 Easley, J. J., Hastings.
 Francke, Edw., Johnstown (Dale).
 Gunn, Jno. A., Patton.
 James, E. & Son, Ebensburg.
 Keffner, W. O., Frugality.
 Kress, F. C., Lilly.
 Krumbine, Dr. G. W., Ashville.

Little, W. A. B., Loretto.
 Markley, Dr. J. P., Blandberg.
 Morris, H. A., Barnesboro.
 Reed, K. A., Gallitzin.
 Scalp Drug Co., Scalp Level.
 Sible, L. A. & Co., Johnstown.
 South Fork Phar., South Fork.
 Stricker, O. J., Portage.
 Study, E. L., Cresson.

CAMERON COUNTY.

Brookbank Mer. Co., Driftwood.
Council Bros., Sinnemahoning.

Emporium Drug Co., Emporium.

CARBON COUNTY.

Albert, Howard, Lansford.
Browell, J. H., Palmerton.
Davis, Thomas E., Summit Hill.
Hess, J. M., East Mauch Chunk.
Latham, Peter H., Weatherly.

Mauch Chunk Phar., Mauch Chunk.
Van Wickles, Est. of A. S., Beaver
Meadow.
Wagner, Chas. H., Lehighton.
Watkins, William R., Nesquehoning.

CENTRE COUNTY.

Green, F. Potts, Bellefonte.
Meek, H. D., State College.
Melick, W. M., Philipsburg.
Meyer, Thomas F., Millheim.

Moore, H. A., Howard.
Murray & Bitner, Center Hall.
Sickel, William A., Snow Shoe.

CHESTER COUNTY.

Aiken, James, Berwyn.
Corson, Dr. L. S., Glen Moore.
Dancy, H. H., Phoenixville.
Houston, Frank P., West Grove.
Hudson, Thompson, Hopewell Cotton
Works.
Hutchison, David W., East Down-
ingtown.
McCullough, C. B., Oxford.

Mezilligan, Mrs. H. Y., Avondale.
Seltzer, Chas. J., Parkesburg.
Taylor, W. C., Spring City.
Thatcher, Jesse, West Chester.
Walton, Geo. R., Malvern.

Young, W. S., Coatesville.

(Vacancy) Honey Brook.

CLARION COUNTY.

Corbett, W. W., New Bethlehem.
Craig, J. S., St. Petersburg.
Greer, Dr. R. J., East Brady.
Hawthorn Drug Co., Hawthorn.
Kerr, J. W., Rimersburg.
Kuhns, G. W., Leeper.

McKee, L. R., Sligo.
Mooney, John A., Curllsville.
Reid's Drug Store, Clarion.
Snyder's Pharmacy, Shippensburg.
Whitling, W. H., Knox.

CLEARFIELD COUNTY.

Brenner, F. A., Clearfield.
Currier, Dr. J., Grampian.
Flegal, Dr. J. S., Karthaus.
Glen Richey Trading Co., Glen Richey.
Lydic, Alex. D., Mahaffey.
McCartney, W. C., Coalport.
Miller, Dr. S. J., Madera.
Phoenix Drug Store, Houtzdale.

Quinn, J. S., Du Bois.
Read, F. B. & Co., Osceola Mills.
Shugert, H. C., Morrisdale Mines.
Spackman, Dr. J. P., Peale.
Tyler Mercantile Co., Tyler.
Winburne Phar., Winburne.
Wrigley, W. K., Curwensville.

CLINTON COUNTY.

Hilton & Heffner, Lock Haven.
McGhee, John, Beech Creek.
Mayes, T. E., Renovo.

Mervine, Dr. Graydon D., Bitumen
Valley Drug Store, Mill Hall.
Waitz, Frank, Flemington.

COLUMBIA COUNTY.

Clewell & Currin, Berwick.
Ely, Chas. S., Millville.
Fisher, J. F., Catawissa.
Goldsworthy, John W., Centralia.

Hower, H. V., Midlinville.
McHenry, Dr. M., Benton.
Ringler, Geo. P., Bloomsburg.

CRAWFORD COUNTY.

Easterwood, F. K., Meadville.
Fisher & Fisher, Springboro.
Lydell, James, Cambridge Springs.
Miller & Allen, Spartansburg.

Stratton, George, Linesville.
Wilkins & Kemble, Titusville.
(Vacancy) Centerville.

CUMBERLAND COUNTY.

Claudy, R. B., Newville.
 Eckels Bros., Mechanicsburg.
 Fleming & Fleming, Shippensburg.
 Good's Pharmacy, New Cumberland.

Holmes, R. H., Enola.
 Shearer, W. R., Carlisle.
 Snyder's Drug Store, Mt. Holly Springs.

DAUPHIN COUNTY.

Coble, A. C., Dauphin.
 Davis, T. B., Williamstown.
 Few, C. S., Middletown.
 Gross, E. Z., Harrisburg.
 Hay, Jno. W., Harrisburg.
 Kuntz, John H., West Hanover.
 Lebo, Dr. W. E., Gratz.
 Leese, O. B., Lingelstown.

Peters, D. A. Est., Steelton.
 Ruff, J. Irwin, Hummelstown.
 Smith, A. M. & Co., Halifax.
 Smith, W. G., Lykens.
 Starr, Jno. W., Millersburg.
 Stroup, N. W., Elizabethville.
 (Vacancy) Derry Church.

DELAWARE COUNTY.

Castle, A. L., Chester.
 Cloud, Harlan, Darby.
 Concordville Supply Co., Concordville.
 Davis, Harry M., Lansdowne.
 Dwyer, Jos. M., Crum Lynne.
 Ellis Phar., Media.

Hadley, H. C., Wayne.
 Perry & Son, Llanerch.
 Rea, J. H., Chester.
 Shirer, V. C., Swarthmore.
 Willingmyre, P. S., Upland.

ELK COUNTY.

Amend, John, Wilcox.
 Bennett's Branch Supply Co., Dent's
 Run.
 Daniels, J. W., Hallton.
 Lühr, F. A., St. Marys.

Smith, V. R., Johnsonburg.
 Ross Drug Co., Ridgway.
 Shawmut Commercial Co., Shawmut.

ERIE COUNTY.

Ames, N. F. & Co., Corry.
 Anderson, R. D., Northeast.
 Andrews, W. C., Erie.
 Brick Drug Store, Edinboro.

Gates, William, Union City.
 Keemer, Jno. H. C., Wattsburg.
 Newman, A. C., Albion.
 Nick & Keith, Girard.

FAYETTE COUNTY.

Bulger, H. H. & Co., Brownsville.
 Connell, F. J., Masontown.
 Dawson Phar., Dawson.
 Dunaway, W. C., Fairchance.
 Feather, G. A., Smithfield.

Huston, Frank, Connellsville.
 Oglevee, F. E., Vanderbilt.
 Rathmell Bros., Cadwallader.
 Springer, R. E., Uniontown.
 Williams Pharmacy, Fayette City.

FOREST COUNTY.

Detar, C. Y., Kellettville.
 Dunn, J. C., Tionesta.
 Ingersoll, J. E., Lynch.

Kerr, M. C., West Hickory.
 Mayburg Supply Co., Mayburg.
 Neill, A. D., Marionville.

FRANKLIN COUNTY.

Brinley, J. F., Dry Run.
 Carl, Chas. B., Greencastle.
 Johnson, Dr. Fred C., Mont Alto.
 Krebs, Harry B., Mercersburg.

Miller, D. L., Waynesboro.
 Montgomery, J. C., Chambersburg.
 Skinner & Haller, Chambersburg.

FULTON COUNTY.

Barton, C. J., Hustontown.
 Cunningham, N. G., New Grenada.

Palmer, J. E., Warfordsburg.
 Seylar, Leslie W., McConnellsburg.

GREENE COUNTY.

Day, Dr. C. H., Clarksville.
Gibbons, Dr. A. J., Carmichaels.
Hatfield, G. W., Mt. Morris.

Kline, W. O., Rice's Landing.
Ullom & Bailey, Waynesburg.

HUNTINGDON COUNTY.

Brumbaugh Co., Marklesburg.
Eneyart, D. R. P., Orbisonia.
Grove, Harry R., Alexandria.
Guepner, H. A., Robertsdale.
Mattern, F. K., Warrior's Mark.

Minnick, J. M., Mount Union.
Parker, A. M., Mapleton Depot.
Richardson, P. W., Birmingham.
Steel, H. E., Huntingdon.

INDIANA COUNTY.

Allison, Elmer W., Indiana.
Conner, Jno. B., Glen Campbell.
Elliott, H. M. Armagh.
Fisher, James, Rossiter.
Fleming, J. A., Homer City.
Freed, A. L., Arcadia.
Goodlin, Elmer E., Saltsburg.
Green, E., Plumville.
Griffith, Will C., Marion Center.
Kamerer, S. A., Smicksburg.

Lydic, H. E., Clymer.
McCullough, H. L., Cookport.
McHenry, Dr. R. F., Heilwood.
Miller, M. G., Blairsville.
Neal, T. S., Trade City.
Oberlin Bros., Rochester Mills.
Ross, H. T., Brush Valley.
Smith, Dr. J. H., Shelocta.
Stephens, T. D., Penn Run.
Stewart, A. H., Idamar.

JEFFERSON COUNTY.

Abbott & Blakeslee, Coal Glen.
Anita Supply Co., Anita.
Cook Bros., Hamilton.
Guthrie, H. F., Summerville.
Hamilton, S. S., Punxsutawney.
Henderson & Craig, Brookville.
Humphreys, G. H., Brockwayville.

Kunselman, M. J., Coolspring.
Mahoning Supply Co., Eleanor.
Punxsutawney Drug Co., Punxsutawney.
Schwab's Phar., Big Run.
Steiner, D. I., Knoxdale.
Stoke & Feicht Drug Co., Reynoldsville.
Tyler Mer. Co., Sykesville.

JUNIATA COUNTY.

Banks, W. H. & Co., Mifflin.
Crawford, M. P., Mifflintown.
Haines, W. H., Thompsonstown.

Heckerman's Drug Store, Port Royal.
McMeen, J. B., East Waterford.

LACKAWANNA COUNTY.

Bloes, W. S., Peckville.
Bone, J. G. & Son, Dunmore.
Chittenden Phar., The, Scranton.
Coyne, F. R., Old Forge.
Davis, Jos., Taylor.
Dennis, F. E., Carbondale.
Foote, M. A., Archbald.
Graves, J. M. & F. M., Jermyn.
Griffin, H. E., Scranton.
Jenkins, Harry S., Scranton.

Knedler, Dr. J. W., Moscow.
Koempel, Carl, Scranton.
Lalley, Peter F., Scranton.
Manners, W. R., Moosic.
Mullen, John J., Minooka.
O'Connor, Thos., Jessup.
Purdon, T. A., Dalton.
Shannon, T. A., Dickson City.
Watkins, C. J., Olyphant.

LANCASTER COUNTY.

Bucher, W. L., Columbia.
Dierolf, Chas. B., Elizabethtown.
Fry, H. P., Lititz.
Garber, Elmer W., Mount Joy.
Libhart Drug Co., Marietta.
Miller, J. A., Lancaster.

Quarryville Drug Co., Quarryville.
Reeder, Dr. M. T., Millersville.
Royer, G. S., Ephrata.
Ruhl, H. F., Manheim.
Weaver, J. G., Strasburg.
Wendle, Samuel S., Christiana.

LAWRENCE COUNTY.

Cohen, Arthur, Ellwood City.
Jewell, T. H., New Wilmington.
McKinley & Frantz, New Castle.

Moorhead, Frank B., Volant.
Shields, F. O., New Bedford.

LEBANON COUNTY.

Behney, Chas. T., Fredericksburg.
 Bogar, Chas. E., Lebanon.
 Bross, Thos. M., Jonestown.

Bundel, C. E., Palmyra.
 Kline, Wm. C., Myerstown.
 Seabold, W. S., Annville.

LEHIGH COUNTY.

Backenstoe, M. J., Emaus.
 Barndt, Mrs. S. K., Alburtis.
 Dundore, Harry W., Emaus.
 Gross, H. D. & Son, Schnecksville.
 Horn, Chas. W., Slatington.

Horn's Drug Store, Coplay.
 Keiper, H. L., Allentown.
 Lawall Bros., Catasaugua.
 Mohr, John J., Fogelsville.

LUZERNE COUNTY.

Briggs, Dr. J. F., Shickshinny.
 Church, W. F., Kingston.
 Colborn, W. T., Ashley.
 Colley, F. R., Wilkes-Barre.
 Durbin's Keystone Phar., Plymouth.
 Evans, Wm. E., Maltby.
 Frank & Barber, Freeland.
 Gabrio, W. F., Lattimer Mines.
 Meyer, R. H., Nanticoke.

Mumaw & Hughes, Hazleton.
 Myers, Dr. J. J., Nescopeck.
 Norton, Geo. E., Dallas.
 Peck, J. L., Pittston.
 Quigley, F. J., Parsons.
 Renniman & Co., Avoca.
 Schiebel, J. W., Duryea.
 Wentz, Dr. G. L., Drifton.
 White, W. D. & Co., Wilkes-Barre.

LYCOMING COUNTY.

Corson, H. W., Slate Run.
 Harter, C. W., Muncy.
 Keys, S. G., Ralston.
 Miller, John L., Montgomery.

Staples, B. E., Jersey Shore.
 Sutliff, Jacob, Hughesville.
 Walton, L. L. & Co., Williamsport.

McKEAN COUNTY.

Hogarth, L. K., Smethport.
 Kane Drug Co., Kane.
 Mills, John C., Duke Center.
 Sartwell, T. L., Eldred.

Stahl, C. J. & Co., Mt. Jewett.
 Studholme Bros., Port Allegheny.
 Thompson & Wood, Bradford.

MERCER COUNTY.

Chapin, Geo. W., Greenfield.
 Donaldson, L. W. & Co., Jackson Center.
 Gamble, J. R., Jamestown.
 Heckman, H. V., Fredonia.
 Hines, J. P., Stoneboro.
 Hyde, Mrs. M. H., West Middlesex.
 Jackson, T. C., Hadley.
 Kennedy, C. C., Grove City.

Lafferty, T. W., Sharon.
 Martin, E. K., & Son, Sheakleyville.

Mook, O. L., New Lebanon.
 Smith, Dr. D. H., Millbrook.
 Stewart, J., Clark.
 West, Harry D., Greenville.
 (Vacancy) Mercer

MIFFLIN COUNTY.

Ernest, J. A., Wagner.
 McDonald, J. A., Reedsville.
 Muthersbough, J. A., Lewistown.
 Roche, William F., McVeytown.

Shaver, Henry B., Newton Hamilton
 Thompson, Nor & Son, Milroy.
 (Vacancy) Belleville.

MONROE COUNTY.

Flaer, Steward, Stroudsburg.
 Red Cross Phar., E. Stroudsburg.
 Rhoads, Dr. Geo. H., Tobyhanna.
 Seguire, J. A., Cresco.

Stotz, Dr. J. A., Brodheadsville.
 Trach, Dr. D. C., Kresgeville.
 Wertman, Dr. A. A., Tannersville.

MONTGOMERY COUNTY.

Bailey, G. W., Royersford.
 Bentz, Chas. S., Pottstown.
 Bunting, Frank, Souderton.
 Childs' Phar., North Wales.
 Craig, James D., Fort Washington.
 Culbert, Jos. W., Collegeville.
 Huzzard, Curtis, Norristown.
 King, A. J., Ardmore.

King, L. Stanley, Bala.
 Kuhns, E. J., Lansdale.
 McLaughlin, Harry A., Jenkintown.
 Moore, Christian Est., Bryn Mawr.
 Neville, William, Conshohocken.
 Pennepacker & Bromer, Schwenkville.
 Rothwell, Walter, Hatboro.
 Wehler, Randolph, Pennsburg.

MONTOUR COUNTY.

Gosh, W. E., Danville.

NORTHAMPTON COUNTY.

Burkhart, H. A., Bethlehem.
 Eisenhart, E. K., Bangor.
 Heller, H. D., Hellertown.
 Jacoby, Cyrus, South Bethlehem.
 Miller, S. R., Bath.

Scheffler, J. S., Pen Argyl.
 Stover, C. E., Easton.
 Weaver's Phar., Easton.
 Yale, Ellsworth, W., Siegfried.
 Yeakel, Nelson L & Co., Nazareth.

NORTHUMBERLAND COUNTY.

Armstrong, W. K., Sunbury.
 Clarkson, T. R. & Co., Shamokin.
 Dunn, John B., Watsonstown.
 Hollister, Samuel, Locust Gap.
 Keiser, E. L., Milton.
 Krebs, J. S., Herndon.

Lyons, F., Turbotville.
 Mengel, J. S., Trevorton.
 Samuel, Dr. E. W., Mt. Carmel.
 Standard Drug Store, Mt. Carmel.
 Wenck, S. M. G. & Son, Northumberland.

PERRY COUNTY.

Eby, B. M., Newport.
 Hench, D. U., Blain.
 Johnston, Dr. A. R., New Bloomfield.
 Lahr, J. B., Millerstown.
 Rabb, W. A., Duncannon.

Rhea, J. A., New Germantown.
 Shuler, S. M. & Sons, Liverpool.
 Snyder, E. Walter, Marysville.
 Zimmerman, Thaddeus, Ickesburg.

PIKE COUNTY.

Armstrong, C. O., Milford.
 Balch, A. W., Matamoras.

Gilpin, Thos. H., Jr., Greentown.
 Shannon, W. R., Lackawaxen.

POTTER COUNTY.

Chapman, G. F., Genesee.
 Gilbert, W. E., Harrison Valley.
 Lane, H. K., Ulysses.
 Lyon, G. W., Shingle House.
 McGee & Miller, Costello.
 Meine, Dr. Chas., Germania.

Merriion, H. H., Roulette.
 Middaugh, V. R., Austin.
 Payne, A. B., Oswayo.
 Richardson, L., Cross Fork.
 Robertson, J. W., Galetton.
 Thompson, M. S. & Co., Coudersport.

SCHUYLKILL COUNTY.

Beck, Charles F., Cressona.
 Bensinger, G. I., Schuylkill Haven.
 Bolich, H. C., New Ringgold.
 Bond, J. T., Tamaqua.
 Brown, George L., Minersville.
 Brown, Frank L., Auburn.
 Cowen, William S., Pottsville.
 Davis, H. R., Coaldale.
 Depew, J. A., Delano.
 Hawk, W. A., Tower City.
 Gwinner, Harry J., Saint Clair.
 Holt, Wm. P., Frackville.

Hubler, G. G., Gordon.
 Jenkins, Dr. W. S., Sheppton.
 Krebs, H. J., Mahanoy City.
 McBride, John, McAdoo.
 Monaghan, Dr. W. J., Girardville.
 Peoples' Phar., Tremont.
 Sutton, John, Pine Grove.
 Updegrave, R. R., Valley View.
 Wasley's Phar., Shenandoah.
 Williams, R. J., Ashland.
 (Vacancy) Port Carbon.

SNYDER COUNTY.

Charles, Jerry, Freeburg.
 Miller, Dr. E. M., Beavertown.
 Snook, A. E., Middleburg.

Ulsh, Calvin, McClure.
 Wagenseller, George D., Selinsgrove.
 Wagner, J. O., Beaver Springs.

SOMERSET COUNTY.

Bittner, Dr. Chas. R., Hooversville.
 Brallier, J. J., Berlin.
 Brant, R. P., Shanksville.
 Dobson, G. L., Stoyestown.
 Home Drug Co., Windber.
 Jacobs, Dr. T. J., Somerfield.
 Meyers, H. P., Confluence.
 Miller, Dr. E. H., Elk Lick.

Mullin & Wiley, Rockwood.
 Pickings, J. S., Somerset.
 Pollard, R. T., Garrett.
 Sembower, A. J., Markleton.
 Sprowls, C. R., Boswell.
 Thoms, F. B., Meyersdale.
 Zimmerman, Dr. Henry A., Holsopple.

SULLIVAN COUNTY.

Buschhausen, A. H., Laporte.
 Davis, Hugh K., Sonestown.
 Hoffa, Chas. W., Dushore.

Lopez Drug Co., Lopez.
 Rogers, M. A. Sons, Forkville.

SUSQUEHANNA COUNTY.

Barnes, A. D., Herrick Center.
 Blair, M. A., New Milford.
 Carrington, C. R., Susquehanna.
 Davis & Allen, Forest City.

Lathrop, H. B., Springville.
 Morris, F. D., Montrose.
 Sands, F. E. & Co., Hallstead.
 Taylor, A. J., Hopbottom.

TIOGA COUNTY.

Bates, John P., Mansfield.
 Blatchley, H. L., Wellsboro.
 Bowen, E., Blossburg.
 Darling's Phar., Lawrenceville.
 Fessler, T. A., Elkland.

Gilbert, F. L., Knoxville.
 Holcomb, Frank B., Westfield.
 Miller, Fred B., Liberty.
 Miller, Jesse B., Millerton.
 Wells, Mrs. J. E., Tioga.

UNION COUNTY.

Baker, Dr. T. D., Lewisburg.
 Galloway & Meek, Allenwood.

Glover, O. W. H., Laurelton.
 Steams, J. C., Mifflinburg.

VENANGO COUNTY.

Britton & Gaddess, Oil City.
 Cross' Sons, Wilson, Kennerdell.
 Curtis, L. C., Utica.
 Curtis, Guy H., Franklin.

Gosser Drug Co., Emlenton.
 Snyder, Chas. P., Polk.
 Strahl, Henry, Petroleum Center.
 Zeamer, H. C., Pleasantville.

WARREN COUNTY.

Clark, A. A., Russell.
 Gass, Dr. Jas., Sheffield.
 Kemble, C. & Son, Tidionte.
 McDonald, J. G., Sugar Grove.

Mead, R. L., Youngsville.
 Norton, B. E., Kinzua.
 Pierce, Wm. S., Warren.
 Simpson Bros., North Clarendon.

WASHINGTON COUNTY.

Hogsett Bros., Monongahela.
 McMurray, H. B., Burgettstown.
 Pipers' Drug Store, California.
 Piper Bros., Charleroi.
 Piper & Dague, Donora.

Retzer, Charles, Hickory.
 Robin's Phar., McDonald.
 Sprowl, J. N., Claysville.
 Thompson, H. M., Canonsburg.
 Valentine Bros., Washington.

WAYNE COUNTY.

Jadwin, C. C., Honesdale.	Stewart, J. E., Waymart.
Mullin, Dr. O. J., Hamlinston.	Tiffany, J. E., Pleasant Mount.
Pethick, C. M., Tyler Hill.	(Vacancy) Hawley.
Cochecton, N. Y., Shipping Station.	

WESTMORELAND COUNTY.

Anderson, Ralph, Latrobe.	Hugus, R. T., Jeannette.
Bolivar Phar., Bolivar.	Hunnell, B. S., New Kensington.
Broadway Drug Co., Scottdale.	Kirk, W. P., Monessen.
Coldsmith, C. F., Mt. Pleasant.	Lewis, J. K., Greensburg.
Cook, J. G., New Alexandria.	Naley, Homer V., Manor.
Denmark Supply Co., Claridge.	Obley, H. A., West Newton.
Diffenderfer, H. D., Export.	Wilson, J. M., New Florence.
Fink, George W., Irwin.	Wilt, R. A., Ligonier.
Fox, Chas. E., Vandergrift.	Zimmerman, W. J., Delmont.
Freeman, J. W., Derry.	

WYOMING COUNTY.

Besteder, Chas., Center Moreland.	Shaw, A. L., Noxen.
Capwell, Harry M., Meshoppen.	Sickler, H., Tunkhannock.
Fitch, A. B., Factoryville.	Vosburg, D. C. & Bro., Mill City.
Reynolds, Oscar J., Nicholson.	

YORK COUNTY.

Britcher, Milton W., Dillsburg.	Mull, Harry, Stewartstown.
Dougherty, W. P., Wrightsville.	Murphy, J. C., York Haven.
Emlet & Jenkins, Hanover.	Overmiller, N. Allen, East Prospect.
Gable, John W., Hellam.	Seitz, J. E., Glen Rock.
Grove, J. H., New Freedom.	Smith, Samuel S., Windsor.
Hetrick, Annie L., Wellsville.	Stacks, A., Homer, York.
Hoke, Martin, Spring Grove.	Stahle, R. S., Emigsville.
Lafean, A. H. & Bro., York.	Stewart, T. D., Delta.
Meyers, G. A., Dallastown.	Wallace, N. G., Dover.
Moody, C. W., Red Lion.	

SANITARY ENGINEERING DIVISION.

Chief Engineer, F. Herbert Snow,

Harrisburg, Dauphin County.

Assistant Engineer on Office Work—C. Howe Cummings, Philadelphia.
 First Assistant Engineer on Water Works and Sewerage—Paul Hooker, Harrisburg, Dauphin County.
 Assistant Engineer on Water Works and Sewage—Ralph Irwin, Meadville, Crawford County.
 Assistant Engineer on Design and Construction—C. A. Emerson, Jr., Philadelphia.
 Assistant Engineer on Tests of Water and Sewage Treatment Plants—William H. Ennis, Philadelphia.
 Assistant Engineers—A. H. Beard, Pittsburgh, Allegheny County.
 H. B. Moses, Harrisburg, Dauphin County.
 J. M. Mahon, Jr., Harrisburg, Dauphin County.

Chief Field Inspector—M. K. Ely, Doylestown, Bucks County.

Stenographers—Miss M. Irene Cuenot, Harrisburg, Dauphin County.
 Miss M. Louise Eckels, Carlisle, Cumberland County.
 Miss Jane Gilbert, Harrisburg, Dauphin County.
 Miss Mary E. Russell, Honesdale, Wayne County.
 Miss M. Ethel Hurst, Lancaster, Lancaster County.
 Mrs. M. K. Sourbeer, Harrisburg, Dauphin County.
 Miss Elizabeth R. Fleisher, Newport, Perry County.
 Miss Anna E. Moore, Harrisburg, Dauphin County.
 Miss Leola Hannah, Meadville, Crawford County.
 Miss Frances W. Smith, Harrisburg, Dauphin County.
 Miss Clara V. Mahaney, Mont Alto, Franklin County.

Clerks—Daniel V. Ness, Manchester, York County.
 *Warren F. Warlow, Harrisburg, Dauphin County.
 William C. Wanbaugh, Harrisburg, Dauphin County.
 H. P. Rees, Wellsboro, Tioga County.
 Mrs. Nellie S. Pretty, Chester, Delaware County.
 Mrs. Lila H. Trace, Harrisburg, Dauphin County.
 Miss Edith Rourke, Harrisburg, Dauphin County.

- Draughtsmen—James L. W. Gibbs, Harrisburg, Dauphin County.
 C. A. Eckbert, Curwensville, Clearfield County.
 M. H. Matthes, Lebanon, Lebanon County.
 John W. German, Jr., Harrisburg, Dauphin County.
 Harry T. Campion, Carbondale, Lackawanna County.
 Ivan M. Glace, Harrisburg, Dauphin County.
 F. Marion Sourbeer, Harrisburg, Dauphin County.
 George E. Williams, Harrisburg, Dauphin County.
 Douglass Andrews, Harrisburg, Dauphin County.
 Richard Krall, Harrisburg, Dauphin County.
 C. R. Forbes, Quarryville, Lancaster County.
 *J. R. Hoffert, Harrisburg, Dauphin County.
 I. L. Miller, Harrisburg, Dauphin County.
- Assistant Engineers—W. C. Riddle, Lancaster, Lancaster County.
 M. E. Shaughnessy, Lewisburg, Union County.
 C. B. Mark, Lebanon, Lebanon County.
- Engineering Assistants—Ira F. Zeigler, Carlisle, Cumberland County.
 Charles T. Maclay, Chambersburg, Franklin County.
- Inspectors of Water Filters—W. W. Ritter, Liverpool, Perry County.
 R. B. Styer, Lancaster, Lancaster County.
- Sanitary Inspectors—John J. Considine, Philadelphia.
 Henry Andrews, Ardmore, Montgomery County.
 James M. Clark, New Castle, Lawrence County.
 W. R. Teats, Burnham, Mifflin County.
 Daniel Zellers, Lebanon, Lebanon County.
 J. B. Nightingale, Doylestown, Bucks County.
 H. S. Kauffman, Lititz, Lancaster County.
 W. K. Claypoole, Philadelphia.
 Otto F. Nickel, Johnstown, Cambria County.
 Warren S. Hood, Philadelphia.
 Charles H. Spelker, Pittsburgh, Allegheny County.
 R. F. Einstein, Harrisburg, Dauphin County.
 H. M. Haines, Harrisburg, Dauphin County.
 Morris Z. Frederick, West Telford, Montgomery County.
 Thomas B. Nicholson, North Wales, Montgomery County.
 Roy M. Souder, Lancaster, Lancaster County.
 W. W. Reno, Rochester, Beaver County.
 Frank H. Lanard, Philadelphia.
 Timothy Whelan, Clifton Heights, Delaware County.
 J. W. Eisenhart, York, York County.
 J. A. McCleary, Altoona, Blair County.
 Robert S. Hansbury, Philadelphia.
 Harry E. Magee, Philadelphia.
 D. J. Marshall, New Castle, Lawrence County.
 William Ellis, Phoenixville, Chester County.
 J. H. Silliman, Tamaqua, Schuylkill County.
 D. M. Irwin, Greensburg, Westmoreland County.
 H. A. Miller, Lebanon, Lebanon County.
 Joseph S. Couch, Oil City, Venango County.
 J. E. Dale, Patton, Clearfield County.
 *T. W. Templeton, Plymouth, Luzerne County.
 H. B. Moore, Harrisburg, Dauphin County.
 W. E. Rice, Duncannon, Perry County.
 I. D. Thompson, McConnellsburg, Fulton County.
 R. L. Vare, Philadelphia.
 W. H. Morris, Duncannon, Perry County.
 Simon B. Engle, Philadelphia.
 *L. E. Tiffany, Hallstead, Susquehanna County.
 L. N. Slagle, Lewistown, Mifflin County.
 Joseph W. Roebuck, Philadelphia.
 Charles P. Jarrett, Norristown, Montgomery County.
 Andrew J. Bohl, Harrisburg, Dauphin County.
 R. M. Courtney, Mt. Penn, Berks County.
 John K. Miller, Harrisburg, Dauphin County.
 W. G. Carson, Reedsville, Mifflin County.
 Charles W. Collins, Butler, Butler County.
 Andrew W. Conrad, Nicholson, Wyoming County.
 J. H. Stewart, Philadelphia.
 Edward H. Evans, Philadelphia.
 L. S. Haldeman, Marietta, Lancaster County.
 Joseph M. Hellings, Philadelphia.
 J. Henry Laughlin, Philadelphia.
 H. C. Beckley, Catawissa, Columbia County.
 L. S. Imler, Imler, P. O., Bedford County.
 John J. Oates, Charleroi, Washington County.
 Lester L. Pierce, Towanda, Bradford County.
 James B. Aurand, Lewistown, Mifflin County.

DIVISION OF ACCOUNTING AND PURCHASING.

Chief of Division, E. I. Simpson,
Philadelphia.

Bookkeepers—O. Simmons, Philadelphia.

Miss Bertha W. Knoke, Philadelphia.

Miss Lillian McCarty, Muncy, Lycoming County.

Miss Margaret Maher, Philadelphia.

Stenographers—Miss Edith M. DeNegre, Lansdowne, Delaware County.

Miss Pauline C. Simon, Philadelphia.

Miss Lulu F. Prescott, Matamoras, Pike County.

Mrs. Adele M. Henderson, Philadelphia.

Clerks—Miss Bessie Derrickson, Philadelphia.

Mrs. Elizabeth R. Norton, Philadelphia.

Miss Sophia G. Penn, Norristown, Montgomery County.

Miss Florence B. Thome, Lansdowne, Delaware County.

Miss Agnes L. Devlin, Philadelphia.

Miss Mattie L. Schmidt, Hanover, York County.

Miss Celia M. Cottingham, Philadelphia.

Miss Elizabeth G. Haines, Philadelphia.

Miss Anna M. Groetch, Philadelphia.

Miss Lillian Kendall, Philadelphia.

Miss May B. Taylor, Lansdowne, Delaware County.

Miss Florence K. Sheetz, Philadelphia.

Miss Maud Uhler, Philadelphia.

Charles H. Clappier, Philadelphia.

Miss A. Adessa Fry, Harrisburg, Dauphin County.

Earl Hackman, Lansdale, Montgomery County.

Miss Louise Spangler, Chambersburg, Franklin County.

Miss Katherine A. Mullin, Harrisburg, Dauphin County.

Miss Martha T. Beck, Harrisburg, Dauphin County.

DIVISION OF SUPPLIES.

Superintendent, Charles Hartzell,
Philadelphia.

Stenographer—Miss Caroline S. Patschke, Lebanon, Lebanon County.

Clerks—Miss Susan Riegel, Steelton, Dauphin County.

Miss Eva C. Mailey, Harrisburg, Dauphin County.

George T. Lutz, Liverpool, Perry County.

THE SANITARY LEGISLATION OF 1911.

The year in which the Legislature meets always imposes additional duties on the Commissioner of Health and calls for especial vigilance on his part. The law creating the Department makes it his duty to "suggest any further legislative action or precaution deemed necessary for the better protection of the public health" while the law creating the former State Board of Health, the provisions of which were extended to him, declares that he "shall suggest amendments to the sanitary laws of the Commonwealth."

And while the three basic laws on which the Department is grounded leave little room for improvement or amendment, yet the experience of two years often discloses some little loophole in the sanitary administration which needs stopping. But apart from positive action of this kind, it is incumbent on the Commissioner to be on the alert to prevent vicious and pernicious legislation from being created. The phrase "for the better protection of the public health" proves a most seductive one for medical quacks and sanitary

cranks who have an axe to grind, and an efficient mask for concealing measures which appear fair on their face but conceal potent germs of evil. For the introduction of such laws it is necessary to be constantly on the watch.

The legislature exhibited at once its entire confidence in the management of this Department, and a high degree of statesmanship, by very considerably increasing the appropriation to the manifold needs of the Department over that of the previous biennium. This appropriation was not made without a very searching inquiry by the Governor and the Committee on Appropriations into all our expenditures and especially a personal visit to Mont Alto in order to determine to what extent the State was warranted in the outlay it was making for the relief of the tuberculous indigent and the resultant control of tuberculosis.

No legislation was directly suggested by the Department, but many bills were submitted to the Commissioner for his consideration. The following are abstracts of

ACTS OF ASSEMBLY OF 1911 PERTAINING, DIRECTLY OR
INDIRECTLY, TO PUBLIC HEALTH.

1st. An Act providing for the protection of the public health and the prevention of fraud and deception by prohibiting the sale, the offering for sale or exposing for sale or having in possession with intent to sell of adulterated or deleterious sausage, defines sausage, and prescribes a penalty for violation thereof.

Act of April 6, 1911, pamphlet laws page number 51.

2nd. A Supplement to an Act entitled "An Act creating a bureau of health in the Department of Public Safety in cities of the second class; defining the powers and duties thereof and of the officers thereunder; prescribing rules, regulations and laws respecting the public health and authorizing and imposing fines, penalties and punishment for violation thereof."

Approved June 26, 1895, and to a supplement thereto, approved March 25, 1903, providing for the vacation or destruction of buildings dangerous to public health, authorizing and imposing fines, penalties, punishment and remedies for violation of the Act and providing a method of abatement.

Approved 29th day of April, 1911, pamphlet laws page number 103

3rd. An Act conferring authority upon the commissioners of the counties respectively, within this Commonwealth, to appropriate money for the maintenance of such indigent residents of this county as maybe patients in the Sanatorium of any society in the county, which may have been duly incorporated for the treatment of residents of such county, suffering from tuberculosis.

Approved the first day of June, 1911. pamphlet laws page number 623.

4th. An Act relating to the right to practice medicine and surgery in the Commonwealth of Pennsylvania and providing a Bureau of Medical Education and Licensure as a Bureau of the Department of Public Instruction and means and methods whereby the right to practice medicine and surgery and any of its minor branches maybe obtained and exemptions therefrom and providing for an appropriation to carry out the provisions of said Act; and providing for revocation or suspension of licenses given by said bureau and providing penalty for violation thereof and repealing all acts or parts of acts inconsistent therewith.

Approved the third day of June, 1911, pamphlet law page number 639.

5th. An Act requiring foundries to be provided with toilet room and water closet, regulating same and providing a penalty for violation thereof.

Approved the 7th day of June, 1911, pamphlet laws page number 673.

6th. An Act providing for the examination, licensure and registration of plumbers and prescribing certain rules, regulations and requirements for the construction of plumbing, house drainage and cess pools in cities of the first class and imposing fines, penalties and forfeitures for violation thereof.

Approved 7th day of June, 1911, pamphlet laws page number 680.

7th. An Act relating to milk, providing for the protection of the public health and the prevention of fraud and deception by regulating the sale of milk, skimmed milk and cream; providing penalty for the violation thereof and providing for the enforcement thereof.

Approved the 8th day of June, 1911. Pamphlet laws page number 712.

8th. An Act amending the twentieth section of an Act approved the first day of May, 1905, by changing the fees for birth and death certificates in cities of the first and second class.

Approved the 13th day of June, 1911, pamphlet laws page number 900.

9th. An Act to provide for the better protection of the lives, bodies and health of women and new-born children throughout the Commonwealth of Pennsylvania by regulating the practice of midwifery as performed by midwives and to provide for the licensing and registration of midwives in the State of Pennsylvania; and to provide that the Medical Council of this State of Pennsylvania shall enforce the provisions of this Act, making an appropriation therefor and providing certain penalties.

Approved the 4th day of June, 1911, pamphlet laws page number 928.*

*Note:—According to the opinion of the Attorney-General this Act is inoperative from the first day of January, 1912; at which time the Medical Council was abolished by the Act creating a Bureau of Medical Education and Licensure. This bill which is a useful one will therefore need to be recreated by the next Legislature.

10th. An Act to amend the 1st and 2nd sections of an Act approved the 1st day of May, 1909, entitled "An Act to authorize municipalities to unite in the construction of a sewage system and to permit municipalities to form corporations for the purpose of constructing a sewage system," by including townships.

Approved the 5th day of June, 1911, pamphlet laws page number 966.

11th. An Act authorizing poor directors to acquire lands, supply, erect and equip hospitals for the care and treatment of indigent persons afflicted with tuberculosis.

Approved the 21st day of June, 1911, pamphlet laws page number 1111.

Of the above bills undoubtedly the most general in its application and the most far reaching in its effects on the public welfare is that providing a Bureau of Medical Education and Licensure for the regulation of medical practice. This law creates one single examining Board instead of a Board for each medical sect or school as provided for by the previous law. The Commissioner of Health was made a member of this Bureau.

CHOLERA WARNING.

The Department having received from the United States Immigrant Bureaus at New York and Philadelphia notification of the arrival of immigrants from countries and ports where the presence of Asiatic-Cholera was suspected, with their names and places of destination, postcards were printed to be addressed to each such immigrant, carrying a return card to be mailed to the Health officer in case of the development of sickness. The following is the card used for immigrants speaking English:

"To Immigrants arriving in Pennsylvania from European Ports:

You are hereby directed to mail this post card to the Department's Health Officer in case of sickness within ten days of your arrival.

The Department of Health requires immediate notice of all sickness in immigrants developing within ten days after reaching their destination."

Similar cards were also printed in Italian, Polish, Lithuanian and German.

POLIOMYELITIS IN PENNSYLVANIA.

Aware of the deep interest that the Medical Profession were taking in the question of poliomyelitis I laid before the Pennsylvania State Medical Society, September 26, 1911, the following information:

Our first field investigation of poliomyelitis was started in September 1907. At that time a mild outbreak of the disease was reported in Elk, Venango, Jefferson, Clarion and Butler Counties. An inten-

sive study of 131 cases made by representatives of the Laboratory Division, under the immediate direction of Dr. Herbert Fox, in the vicinity of Eau Claire, Oil City, Ridgway, DuBois and Butler, convinced us that the disease differed from the sporadic cases of poliomyelitis seen from time to time in various sections of the Commonwealth, in being more fulminating in onset and more characteristic in its evidence of an acute infection.

A detailed clinical study undertaken at that time¹ showed in four cases an apparent period of incubation between the time of known exposure and the onset of illness of from four to seven days.

The average case went to bed in its usual health, was restless during the night, complained of being tired next day, perhaps peevish and fretful, or somnolent and feverish, with glassy conjunctiva and sensitiveness to light; a slightly coated tongue developed and after several days of fever and restlessness, occasionally accompanied by vomiting or convulsions and some times by constipation, in from twenty-four to thirty-six or forty-eight hours, was followed by paralysis in any one or in several of the extremities. A few cases studied at that time were almost typical of what had previously been classed as Landry's Paralysis. During the first few days of illness both before and after the onset of the paralysis, soreness and pain were found over the extremities and trunk, Tache Cerebrale was present in a small percentage of the cases, Kernig's sign was almost constantly present except in the fulminating cases where death occurred shortly after paralysis supervened; in a few cases with diaphragmatic involvement, rhythmical dyspnoea was noted prior to death. Pathological studies undertaken in 1907 showed the typical brain and cord lesions of true poliomyelitis and in some instances the spinal fluid appeared to be under excessive pressure, the patient giving evidence of slight relief after lumbar puncture had been performed. The usual distribution of paralysis was found in this outbreak, practically all types from the most severe fulminating down to a mild type with fleeting paralysis, even to those classed as abortive in character.

Monkeys inoculated with pathological material collected during this outbreak did not develop typical poliomyelitis. Bacteriological studies of four spinal fluids showed a gram-positive diplo- or tetrad, the same organism being found in a number of cultures taken from the nose, throat and eyes of patients affected. This organism resembled closely one described by certain Scandinavian research workers, but failed to produce poliomyelitis in experimental animals.

In 1908 a small number of cases of poliomyelitis, some of them showing so much meningeal irritation that they were reported as cerebro-spinal meningitis, occurred in and around the boroughs of

1. Annual Report of the Commissioner of Health. Pennsylvania, 1907, Pages 420-421.

Gettysburg, McSherrystown, McKnightstown, New Oxford, Cashtown and Fairfield in Adams County. A few sporadic cases occurred in other sections of the Commonwealth.

During 1909 no epidemic was reported from any section of the State and only the usual number of sporadic cases seemed to have occurred.

The outbreaks of 1907 and 1908, with the epidemic of 1909 in Massachusetts, caused me to call together the Advisory Board January 7, 1910, which resolved to make poliomyelitis reportable, so when our epidemic of 1910 appeared in its unparalleled onslaught we were prepared to intelligently record the cases.

In July, 1910, a circular letter was sent out to all the profession throughout the State. Dr. Royer followed this movement up with other letters, asking for more information and offering to make laboratory tests in all cases closely resembling poliomyelitis. The activity of the Department enlisted the interest of the public press which reported the progress of the disease from time to time until not only our profession, but the laity became fully awakened to the gravity of the situation. This resulted in the reporting to the authorities of 1,076 cases.

During our field work nothing new clinically was learned excepting the great number of cases resembling poliomyelitis which never developed to a stage that warranted our making a positive diagnosis, yet so characteristic were the prodromal symptoms of poliomyelitis that without other recognized conditions we were inclined to believe they were either mild or abortive cases of that disease.

The geographical distribution was very general over the Commonwealth. A large majority of the cases were found along the streams. This could be accounted for by the fact that population follows streams. Therefore, we cannot deduce any relationship between the streams and the disease.

The geological studies did seem to indicate a relationship between the disease and wet subsoils². In gravel formation there were fewer cases than in the heavy clay formations.

No vegetable life was found to be related to the disease. The work along that line, however, was not satisfactory for the reason that the many railroads ramifying the entire territory of this State have carried the seeds and spores of all vegetable life out of their indigenous habitats, until few places have alone their own peculiar varieties of plants and fungi.

Insect life was so vast in variety that one was at a loss to suspect any other than the mosquito and the fly.

The cases of poliomyelitis began to increase as vegetable life began to wither. This was surprising, for we know that vegetable life enables the mosquito to widen its geographical distribution very

2. Transactions, College of Physicians, Philadelphia, 1910, Pages 371-378 and 404-406.

considerably. The insect itself cannot by its own powers of locomotion travel far—yet the winds will carry it long distances. It cannot, however, make its home in the open. It depends upon grass and shrubbery to protect it from the high winds. Therefore as vegetation dies off so does the distribution of the mosquito become narrowed.

In 1910 Pennsylvania had the greatest pest of mosquitoes known for years and in that year came the greatest epidemic of poliomyelitis ever known in our State.

This year thus far we have had fewer mosquitoes and up to this time much less poliomyelitis. We must, therefore, until we find out the transmitter, keep our eyes on that insect pest, the mosquito.

The epidemic of 1910 seemed to begin in June in the Lehigh Valley in the vicinity of the two Bethlehems, in July in the central part of Lancaster County in the city of Lancaster and adjacent rural districts, with a small localized outbreak in the same month in Potter County near Galeton and Ulysses, gradually extending during the latter part of the month and throughout August and September to the greater part of the Commonwealth, cases being reported from 55 out of the 67 counties.

The brunt of the epidemic was felt in the Lehigh Valley, in Lancaster County, in Philadelphia County and in the thickly populated counties in the southeastern part of the State with the exception of York and Adams. The following table shows the distribution by counties, as well as by population, whilst the accompanying map gives a still better picture of the distribution throughout the year 1910.

Showing Distribution of Poliomyelitis and Population, 1910.

County.	Cases.	Population.
Adams,	0	34,319
Allegheny,	89	1,018,463
Armstrong,	7	67,880
Beaver,	17	78,353
Bedford,	1	38,879
Berks,	26	183,222
Blair,	0	108,858
Bradford,	4	54,526
Bucks,	27	76,530
Butler,	14	72,689
Cambria,	3	166,131
Cameron,	2	7,644
Carbon,	10	52,846
Centre,	4	43,424
Chester,	11	109,213
Clarion,	0	136,638
Clearfield,	1	93,768
Clinton,	0	31,545
Columbia,	7	48,467
Crawford,	1	61,565
Cumberland,	4	54,479
Dauphin,	11	126,153
Delaware,	16	117,906
Elk,	2	35,871
Erie,	8	115,517
Fayette,	19	167,449
Forest,	0	9,435

County.	Cases	Population.
Franklin,	6	59,775
Fulton,	0	9,703
Greene,	1	28,882
Huntingdon,	1	38,304
Indiana,	5	66,210
Jefferson,	2	63,090
Juniata,	0	15,013
Lackawanna,	4	239,570
Lancaster,	150	167,029
Lawrence,	4	70,032
Lebanon,	3	59,565
Lehigh,	101	118,832
Luzerne,	15	343,186
Lycoming,	4	80,813
McKean,	15	47,868
Mercer,	2	77,699
Mifflin,	4	27,785
Monroe,	6	22,941
Montgomery,	33	159,590
Montour,	1	14,868
Northampton,	140	127,067
Northumberland,	7	111,420
Perry,	5	24,136
Pike,	1	8,033
Potter,	9	29,729
Schuylkill,	15	207,894
Snyder,	1	16,800
Somerset,	7	67,717
Sullivan,	0	11,293
Susquehanna,	0	37,746
Tioga,	19	42,829
Union,	4	16,249
Venango,	4	56,359
Warren,	1	39,592
Washington,	21	143,680
Wayne,	3	29,236
Westmoreland,	50	231,304
Wyoming,	2	15,509
York,	6	136,405
Philadelphia,	143	1,549,008
Total,		1,076.

Seasonal distribution shows that the disease is most prevalent during the height of summer and early autumn. The distribution is well shown by grouping reported cases by months of sickening, the epidemic curve showing well in 1910.

1910.

January,	0
February,	3
March,	2
April,	1
May,	4
June,	27
July,	162
August,	336
September,	318
October,	152
November,	52
December,	10
Month of onset indefinite in,	9

1911.

January,	11
February,	14
March,	11
April,	9
May,	5
June,	7
July,	14
August,	23



350

300

250

200

150

100

50

0

1076 CASES OF

POLIOMYELITIS

GROUPED BY AGE PERIODS

RECORDS FOR 1910

UNDER 1 YEAR	1 TO 2 YEARS	2 TO 3 YEARS	3 TO 4 YEARS	4 TO 5 YEARS	5 TO 6 YEARS	6 TO 7 YEARS	7 TO 8 YEARS	8 TO 9 YEARS	9 TO 10 YEARS	10 TO 15 YEARS	15 TO 20 YEARS	20 TO 25 YEARS	25 TO 30 YEARS	30 AND OVER	NOT STATED
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Our investigations during this large epidemic were first made to definitely fix the diagnosis in communities where the outbreak was reported and to confirm the clinical findings, comparing them with our results obtained in the 1907 outbreak and with results obtained by those who had studied the disease in other communities. Second, to determine the exact distribution of the disease and to learn as much as possible about its epidemic characteristics. Later research work undertaken by the laboratory staff was carried out with considerable detail in the hope that some etiological factor might be found that would aid us in determining what precautionary measures should be practiced.

In determining the distribution in large municipalities spot maps were made for the cities of Bethlehem and South Bethlehem, for Allentown, Lancaster, Philadelphia and Pittsburgh, and in Philadelphia the distribution of poliomyelitis was contrasted with that of epidemic meningitis by a method similar to that used by Dr. Neff in his paper before the College of Physicians. Nothing notable was learned by this plotting. The disease would seem to be much more prevalent in open and newer sections of the city with considerable vegetation and less prevalent in the crowded slum sections of the city ⁽²⁾.

With the clinical features of the disease I will not weary you at this time. These I have dealt with fully in a paper read before the American Medical Association in Los Angeles ⁽³⁾.

The greater number of cases developing poliomyelitis were children, 739 out of the 1,076 cases being under the age of five years. Two children developed the disease at the age of one month, a total of 83 at less than one year old, the greatest number, 346, developing it the first year of life. The oldest patient to sicken was 55 years old. The accompanying diagram shows graphically the number of cases grouped by age periods.

Out of 773 cases of poliomyelitis studied with great care 59 gave a history of exposure to previous cases. In 44 houses one additional person developed the diseases. In 998 dwellings, however, no secondary cases developed in the household. The second cases in infected households varied so greatly in the period of exposure before developing the disease, that we were inclined to feel the danger of transmission was not great enough to justify rigid quarantine.

The disease was not found to follow any definite line of travel and seemed to be influenced in no way by the restrictive measures practiced in the various communities. These measures I may say varied from no restrictions up to rigid quarantine which prevailed in a few communities, with a strict observance of the precautions recommended by the Department in a vast majority of the cases; namely,

2. Transactions, College of Physicians, Philadelphia, 1910. Pages 371-378 and 404-406.

3. American Journal Diseases of Children, October, 1911. Vol. 2, pp. 221-242.

that the affected person be isolated in a room screened from insects, that well children in the household be kept out of the sick room and that they be allowed no raw fruit or uncooked vegetables and that where the community was excited about the disease that the children be kept away from Sabbath or day schools.

Shortly after the first field investigation made by the Chief Medical Inspector in the Bethlehems a branch laboratory was opened in South Bethlehem, the courtesy of space being granted by St. Luke's Hospital. I visited the Bethlehems shortly after this work was started and outlined with great care the various lines of research to be carried out by the laboratory staff. Later in the season, the disease becoming less prevalent in the Lehigh Valley, a laboratory was opened in Lancaster through the courtesy of the city chemist and from this point further field investigation was carried on, much material from each location being taken to the central laboratory in Philadelphia where research work has been continued ever since.

Early in 1910 we were fortunate in securing lumbar punctures in cases in the height of the disease and in securing at autopsies, pathological tissues from those dying during fulminating attacks. This material, when inoculated into monkeys intracerebrally, produced typical attacks of the disease (see transmission experiments Monkeys XIX, XX and XXII), thus confirming the work of Landsteiner and Popper (⁴), that of Flexner and Lewis (⁵), Roemer (⁶), Knopfmacher (⁷), Leiner and Wiesner (⁸) and Landsteiner and Levaditi (⁹). We were soon able to transmit the experimental disease from monkey to monkey (see table of transmission), using for this purpose emulsions from the cord. We confirmed the work of Flexner and Clark (⁵) in failing to exclude the virus by means of porcelain filters (M. XXVII, XXX and XLIV). Immunity has been produced by us in several monkeys by using methods similar to those reported by Flexner, Simon and Clark (⁵), Netter and Levaditi (¹⁰) and Anderson and Frost (¹¹) (M. V, XXXIX, XL).

4. Landsteiner and Popper: *Ztschr. f. Immunitätsforsch.*, Orig. 11, 377.

5. Flexner and Lewis: *Jour. A. M. A.*, Vols. 55, 56, 57.

6. Roemer: *Münch. med. Wochenschr.*, Dec. 7, 1909; Dec. 14, 1909; Feb. 1, 1910.

7. Knopfmacher: *Wien. med. Klin.*, 1909, 44, 1671.

8. C. Leiner and R. V. Wiesner; *Wien. klin. Wochenschr.*, Vienna, Jan. 20, 1910, XXIII, No. 3, pp. 83-118; IX, 329, 1910.

9. Landsteiner and Levaditi: *Compt. rend. Soc. de Biol.*, Dec. 3, 1909; Dec. 24, 1909.

10. Netter, A., and C. Levaditi:—Action microbicide exercée sur le virus de la poliomyélite aigue par le sérum des sujets antérieurement atteints de paralysie infantile: sa constation dans le sérum d'un sujet qui a présenté une forme abortive. (Deuxième note). *C. R. Soc. de biol.*, 1910, 68: 855.

11. Anderson, John F., and Frost, Wade H., Abortive cases of poliomyelitis, *Jour. A. M. A.*, 1911, vol. 56, pp. 663-667.

TABLE OF TRANSMISSIBILITY FROM HUMAN CASE TO MONKEY, AND FROM MONKEY TO MONKEY.

Virus, Case 53, injected into		
M. XIX. Death from paralysis.	M. XXII. Death from paralysis.	M. XX. Paralysis without death. Legs remain paralyzed.
M. XXVII. Inj. with filtered virus. Death from paralysis.		
M. XIV. b. Inj. with virus. Death from paralysis.		
M. XXIV. a. Inj. with virus. Paralysis and death.	M. XXII. b. Inj. with virus. Death from paralysis.	M. XXXII. a. Paralysis and death.
	M. XXXVII. Inj. with virus. Merely depression. No paralysis.	M. XLI. Inj. with virus. Merely depression. No paralysis.
M. XXIX. Inj. filtered virus. Paralysis followed by death.	M. XXX. Inj. filtered virus. Paralysis followed by death.	M. XXXV. Inj. with virus. Paralysis and death.

- MONKEY XIX.** Etherized, trephined and inoculated intracerebrally with 1 c. c. of an emulsion in salt solution of the spinal cord, bulb and pons of a case of acute poliomyelitis in a child Case No. 53. The monkey became paralyzed in the extremities and latterly a paralysis of the respiratory apparatus developed. Died 9-12-10. An examination of the cord, pons, cerebrum and cerebellum showed round cell infiltration, especially marked in the cervical cord.
- MONKEY XX.** Inoculated with same material in the same dosage and at the same time as was Monkey No. 19. He developed a paralysis of both legs. He finally recovered and is living at the present time with a paralysis of one leg only.
- MONKEY XXII.** Inoculated intracerebrally with 1 c. c. of a salt solution emulsion of the glycerinated pons, bulb and cord of Case No. 53. This monkey developed a palsy of the digits, left arm and leg. Complete paralysis developed in the left arm and leg and later the right leg was palsied. The animal was chloroformed and brain and cord removed. The histological examination of cerebrum, cerebellum, pons, bulb and cord shows quite a marked degree of round cell increase.
- MONKEY XXVII.** Etherized and inoculated intracerebrally with 8 c. c. of the filtrate of an emulsion of the pons, bulb and cord of monkey No. 19. Animal was greatly depressed for some time after the operation. Finally his arms became paralyzed and there was some loss of power in his legs. He was chloroformed, brain and cord removed. Histological examination shows round cell infiltration in the cerebrum, cerebellum, pons, bulb, and cord, especially well marked in pons, bulb and cord.
- MONKEY XXIX.** Etherized and inoculated intracerebrally with 8 c. c. of the filtrate of a normal saline emulsion of the cord of Monkey No. 12. He developed a palsy of the left eyelid, and paralysis of the right leg, from which, after 3 months, he had almost completely recovered. After his recovery he was exposed to tuberculosis infection and at the end of six months died with generalized tuberculosis. Examination of his cord showed a slight round cell infiltration in the anterior horns. No increase of round cells was noted in other parts of the central nervous system.
- MONKEY XXX.** Inoculated intracerebrally with 3 c. c. of the filtrate of an emulsion of cord, pons and bulb of Monkey No. 12. Developed a left sided paralysis. He had a right eye squint. Paralysis of the diaphragm ensued causing death. Sections of the cord, pons, bulb, cerebellum and cerebrum show characteristic changes. Anterior poliomyelitis especially well marked in the sections of the lumbar and cervical cord.
- MONKEY XLIV.** Etherized and injected intracerebrally with 3 c. c. of the mixed filtrates of emulsions made from the cords of case No. 53 and of monkeys Nos. 50 52 53-58 41. The right leg and arm and the left leg were completely paralyzed. The neck was twisted toward the right. The animal was chloroformed, brain and cord removed. Typical round cell infiltration was found throughout the sections of brain and cord.
- MONKEY V.** Inoculated subcutaneously at 16 various times with increasing doses of a filtrate of an emulsion of a virulent cord in order to produce immunity. Inoculated intracerebrally with 3 c. c. of an emulsion of a virulent cord. This animal failed to contract the disease.
- MONKEY XXXIX.** Injected intracerebrally with 4 c. c. equal parts of serum of monkey No. 5 and an emulsion of a virulent cord. This monkey continued well and lively after his recovery from the operation never contracting poliomyelitis.
- MONKEY XL.** Injected intracerebrally with 3 c. c. of an emulsion of a virulent cord. 4 c. c. of serum of Monkey No. 5 was, under the same etherization introduced into the left femoral vein. At the end of 24 hours another 4 c. c. of serum of monkey No. 5 was introduced into his right femoral vein. The animal never became ill and is well and lively at this writing.

The effect of formaldehyde upon the virus was determined by work published from the laboratory on the 16th of March of this year ⁽¹²⁾, the effect of "606" ⁽¹³⁾ was tried out in considerable detail by us in association with Dr. Daland, a report of which was published on the 3rd of March of this year. Probably the work that gave us the greatest amount of satisfaction was that first referred to in the laboratory report ⁽¹⁴⁾ under date of March 2nd when we described in considerable detail an organism that was found in the blood of ten different cases of acute poliomyelitis in children and in thir-

12. Pennsylvania Department of Health Laboratory Report, March 16.

13. Pennsylvania Department of Health Laboratory Report, March 3rd.

14. Pennsylvania Department of Health Laboratory Report, March 2nd.



Photomicrograph of pure culture of microorganisms found in the blood of patients with acute anterior poliomyelitis, showing long and short forms of the organism.

teen cases of the disease in experimental animals. This organism appears as a faintly stained blue rod with a regular cell wall about 10 microns long and about .8 microns in width, curved at an angle of sixty to seventy-five degrees at one end, occasionally at both ends. At times the curved end is bulbous. Some of the organisms appear to have a very finely granular protoplasm when the highest amplification is employed. They may be discerned by means of a 4 m. m. dry objective but their characteristics are much more satisfactorily delineated under the 1-12 oil immersion lens. They are found free in the serum as well as within the body of the red blood cell.

The organisms do not retain the violet color when stained by the method of Gram but assume the color of the counter stain which, as generally used in the laboratory, is a very dilute solution of carbol fuchsin.

Since publishing the original laboratory report we have had occasion to make a further report at the Los Angeles meeting ⁽¹⁾ when we showed that we were able to culture the organism on a medium of the central nervous system of a monkey combined with agar-agar and that after several generations were grown on this medium the organism grew well on ordinary laboratory media. We were also able to report that we had demonstrated active motility in this organism, together with the appearance of bi-polar flagella. A full description will be found in the paper already referred to. One of the photomicrographs is reproduced here.

We also stated at that time that we were able to show the moving organism forty-eight hours after inoculating the monkey intracerebrally with the virus of poliomyelitis and that we found it in the blood of the monkey up to three weeks after inoculation. We failed to find it in this monkey twenty-four hours after inoculation. Their numbers were few at the end of forty-eight hours and seemed to increase up to one hundred twenty hours. Examination of the blood of a normal monkey used as a control failed to reveal any of them.

The best stain to bring out the morphology is carbol-thionin, though Loeffler's alkaline methylene-blue, Giemsa, Wright's, Ziehl-Nielsen, carbol-fuchsin and Gram's method demonstrate the organism with no difficulty whatsoever. Stained with carbol-thionin the organism appears as a granulated rod, the young forms measuring 0.6 to 0.8 microns in width by 1 to 2 microns in length. The older forms may appear as long as 10 to 12 microns with a width of 0.6 to 0.8 microns. Many of the indeterminate forms appear as spirals with from two to four loose turns. The longer forms have in many instances bulbous ends which have somewhat the appearance of spores, though free spores have never been observed.

1. American Journal of Diseases of Children 1911, v. 2, p. 237.

The organism is actively motile, having a single polar flagellum at one pole only. It has no demonstrable capsule, and it is decolorized by the method of Gram. Colonies on agar are circular, moist, convex, entire, 1 to 3 mm. in diameter. In color they are bluish gray by direct light, old colonies having a yellowish tinge by transmitted light. Their peripheries are translucent while their centers are thickened and appear yellowish-white. Microscopically they are brownish-white, with a finely granular translucent periphery, and an opaque, brown, grumous center.

Agar Slant: Bluish gray with a suggestion of greenish tinge in cultures three or four days old, moist, raised, regular edges, growth along whole length of streak. White beaded growth in stab.

Gelatin: White, beaded growth along needle track with nail-head, moist growth on surface. No liquefaction.

Potato: Moist, cream to brown, abundant.

Central-Nervous-System-Agar: Gray, moist, very abundant along entire path of inoculation.

Egg Medium (consisting of yolk only): Moist, very abundant, spreading, pinkish growth.

Bouillon: Very turbid, white flocculent sediment. In 120 hours a white ring around the glass tube at the level of the surface of the medium.

Litmus Milk: An initial acidity followed by a gradually increasing alkalinity, with a beginning reduction of the litmus at the bottom of the tube. No coagulation of the casein occurs. In four weeks acidification again takes place; reduction of litmus and firm coagulation after five weeks.

There is a slight reduction of acid in dextrose-agar and saccharose-agar, but not in mannite, maltose or lactose. Gas production does not occur in any of the sugars above mentioned. Mannite turns green after three weeks. The organism grows best in neutral medium, next best in acid, and poorest in alkaline.

Indol is not produced. It seems to grow most abundantly on media rich in phosphates. It does not grow well on media containing much glycerine. The organism grows in the absence of air as well as when the air is given free access.

We have not yet succeeded in producing typical poliomyelitis with the use of this organism alone.

After having watched with keen interest the progress of the disease in the several epidemics in this Commonwealth, it was my privilege to join a committee with Drs. Frost of the Marine Hospital Service and Hill of the Minnesota State Board of Health to make a report ⁽¹⁵⁾ to the American Medical Association at the recent Los Angeles meeting, the conclusions of which were in part as follows:

15. Frost, Dixon and Hill. Jour. A. M. A., vol. LVII No.

"Isolation of all patients known or suspected to have the disease. Since a positive diagnosis can be made only upon the appearance of paralysis, which usually develops one to six days after the onset of febrile symptoms, and in abortive cases does not appear at all; isolation, to offer any hope of effectiveness, must be instituted upon suspicion. Three weeks from onset is suggested as the period of isolation although only a surmise can be made on this point ⁽¹⁾.

Disinfection of all discharges from patients, and of all articles by them and their attendants.

Fumigation of the premises with formaldehyde upon release from isolation. ⁽²⁾.

A quarantine of persons in contact with patients does not seem at present justifiable. It is recommended, however, that members of patients' families be excluded from schools during the period of the patients' isolation and during the possible incubation period of a new case; that is, for three weeks following the end of the last exposure to the (presumptively) contagious person.

For the protection of persons presumably exposed to infection, namely, those in contact with the sick and in communities where the disease is epidemic, the daily administration of hexamethylenamine seems to offer some hope of reducing susceptibility. It seems not unreasonable to suppose that susceptibility, especially of young children, may perhaps be further modified by preserving the gastrointestinal tract in normal condition, namely, by avoiding dietetic errors, by prompt attention to slight gastrointestinal disturbances and by the avoidance of over-exertion in hot weather. Rest, which seems to be an important therapeutic measure, may quite possibly have a preventive effect.

The committee is unable to express any great confidence in the efficacy of the measures above outlined. Even granting that the disease is transmitted directly from person to person by infectious secretions, the difficulties in the way of its prevention are great.

It is often impossible to recognize even severe paralytic cases before the onset of paralysis, which may be several days after the onset of the disease. It is often still more impossible to recognize and isolate abortive cases, whose number may reasonably be supposed to be considerable. Chronic convalescent carries, which are probable, and healthy carriers—which are not improbable, are not recognizable and hence cannot be controlled.

Moreover, the disease is already widespread throughout the country and experience with other infectious diseases has shown the difficulties which beset the eradication of a widespread epidemic in-

(1) In the opinion of one member of the committee (H. W. H.), two weeks is sufficient to meet the situation as we understand it.

(2) In the opinion of one member of the committee (H. W. H.), terminal fumigation is unnecessary. In the present status of our knowledge, concurrent disinfection, i. e., disinfection of the discharges of the nose and mouth, should be rigidly carried out.

fectious disease by quarantine alone. Finally, it will be difficult to estimate the efficacy of preventive measures, since it is impossible to foretell the extent to which the disease is likely to spread in any community without the application of restrictive measures.

These measures I believe justified until we learn more about the epidemiology of the affection.

INSTRUCTIONS TO HEALTH OFFICERS IN REGARD TO ARRIVING IMMIGRANTS.

Health Officer:—

Enclosed please find immigrant destination card giving name of person reaching your district from a cholera infected port. The month and date checked on the upper lines of this card indicate to you the day the individual was released and the name of the city at the upper right hand corner shows the port of entry.

You will please visit this person at once, and again within ten days. At the time of your first visit, hand him the enclosed circular and direct him to notify you on the enclosed postal card of any sickness developing in him or any person of the immediate household. On receipt of such postal card you will make a further visit, inquire as to the nature of the illness and determine definitely if a Doctor of Medicine is in attendance. If so, you will inquire from the attending physician as to the nature of the illness and in either instance report your findings to your County Medical Inspector.

You will combine these visits with other work in the vicinity when possible to do so, making charges on the monthly voucher, giving the name of the immigrant and place of residence in the entry, attaching with your receipts the destination card. Where such immigrants move out of your district before the ten day period has expired you will communicate such knowledge to this Department by letter giving destination of the individual.

Yours truly,

Chief Medical Inspector.

REACHING THE FOREIGN POPULATION.

The distribution of concise, plainly written circulars conveying information upon the various communicable diseases among our population, especially in times of prevailing epidemics has always been a prominent feature of the work of the Department. Here, however, we have been met with an obstacle in a very considerable proportion of cases due to the fact that the families of the sufferers are foreigners who are not familiar with our language. In order to remedy this difficulty, a certain number of our most useful and widely read circulars have been translated during the past year into a number of languages most spoken by the immigrants to the State. These are the circulars on Typhoid Fever, Scarlet Fever, Diphtheria and Tuberculosis. The languages into which they have been put have been German, Italian, Polish and Slavish. Great pains have been taken to make these translations accurate, both as to language and scientific correctness.

DAIRY INSPECTION.

In order to enable the Health Officers to intelligently estimate and clearly report upon the condition of dairies as related to the purity of milk and milk products, a card was prepared specifying the points important to be observed, and requiring only a positive or negative reply. This was accompanied by the following letter of instructions for Dairy Inspection:

To the Health Officer:

You are hereby authorized to inspect all premises where milk is produced that is sold direct to householders or by retail along milk routes, to dealers or to other dairymen, to creameries or cheese factories, and all premises where milk is delivered to shipping stations. You will please commence the inspection of dairy farms in your district on the first day of March and try and finish your inspections by the thirty-first day of the same month.

These Instructions Must Be Observed:

Continue your inspection throughout the day, except when prevented by other Department work. These inspections must be made by routes that can be covered in the shortest mileage possible and in a way that will consume the least time and contract the fewest expenses. At the end of your first day's inspections you will please forward all reports for that day's work and then wait two days before continuing. The object in this delay is to enable this office to go over your inspection reports and check any errors that may be made in filling your first forms. Where errors have been made or

where Health Officers have not properly grasped the intent of questions on form 53, a letter will be mailed calling attention to such errors.

Be sure to number all forms for each day's inspection in regular order, beginning with No. 1 and making the entry on the upper right-hand corner of the face side of the form. Fill out on the face side of each card the name of the county, the name of the township, your own name and your district number. Write plainly the full name of the occupant and owner of each farm or premises and give the Post Office address of each accurately. Write full answers to every question on the form and strike out "yes" or "no" following every question that may be answered by these words. The answer not stricken out will be interpreted as the proper answer to the question.

In answering 6, "Is it polluted?" you should bear in mind that only the water supply which receives drainage from sewers, privies, barnyards, manure piles, slaughter houses or those receiving industrial waste can be considered as polluted.

Question 7 is especially important. The presence of stagnant pools, streams or swamps receiving sewage in which cattle may wade should be noted.

Under the section referring to the handling of milk, we should like you to note especially the appearance of the water in the cooling tank, being particular to see if it is clear and clean, without sediment at the bottom. Make a note of any offensive odor in such tank.

At the end of each day you will fill out form 56 reporting your movements and time consumed. For your first day's work form 56 will be forwarded with the inspection blanks for the day. For all subsequent work you will forward separate blanks with each day's forms securely fastened together, sending them to this office on Saturday night of each week.

In making charges for your work you will be careful to enter the names of each dairyman on your voucher in the same order as is listed in the form reporting your movements, setting forth the total mileage and number of hours consumed in the entry. The number of hours consumed should be counted from the time you leave home in the morning until you arrive home after your last inspection at the end of the day. The time consumed in the various inspections and that consumed in traveling, together with time out for dinner as shown on these separate forms added together must equal the number of hours worked.

Be particular to date each separate inspection form and the forms referring to your movements each day.

Form 53.

No.

COMMONWEALTH OF PENNSYLVANIA, DEPARTMENT OF HEALTH.

Sanitary Inspection of Dairies, For the Purpose of Protecting the Milk
From Dirt and Disease Producing Germs.

Occupant of farm,
 P. O. Address, Twp.,
 Owner, P. O. Address,
 No. of cows, Gallons of milk produced,
 Sold at retail—No—Yes, Town retailed, No. customers,
 Wholesale—No—Yes, Wholesaler's name,
 P. O. Address, Shipping Station, Railroad.
 Miles hauled, Wagon covered—No—Yes,
 Date of inspection, Hour of inspection,

CLEANLINESS OF COWS,

1. Are teats clean?.....No.....Yes.....
 2. Are udders clean?.....No.....Yes.....
 3. Are flanks clean?.....No.....Yes.....
 4. Are tails clean?.....No.....Yes.....

WATER SUPPLY FOR CATTLE.

5. From Spring—No—Yes. Stream—No—Yes. Well—No—Yes.
 6. Is it polluted?.....No.....Yes.....
 7. If polluted, what from?
 8. Can cattle wade in polluted water? No—Yes

STABLE.

9. Is the floor of stable clean and dry?.....No.....Yes.....
 10. Is the ceiling clean?.....No.....Yes.....
 11. Is the ceiling tight?.....No.....Yes.....
 12. Is the manure removed daily?.....No.....Yes.....
 13. Can the cows lie down in their dung?.....No.....Yes.....
 14. Is the stable well ventilated?.....No.....Yes.....
 15. Can sunlight enter the stable?.....No.....Yes.....

COW YARD.

16. Is the stable manure scattered on the ground so that the cattle can lie down
in the same?No.....Yes.....
 17. Are there any pools of manure water in the yard?.....No.....Yes.....

MILK HOUSE.

18. If not separate, what else is kept in the same building?.....
 19. Are all windows and doors screened from flies?.....No.....Yes.....
 20. Are there provisions for hot water where utensils are washed? No.....Yes.....
 21. Are milk pails and strainers clean?No.....Yes.....
 22. Is the water supply used in milk house from spring?.....No.....Yes.....
 Stream No.....Yes..... Well.....No.....Yes.....
 23. Is it polluted?No.....Yes.....
 24. If polluted, from what?

MILKING.

25. Do milkers wear a clean covering over their clothes when milking?.....
 26. Do milkers wash their hands before milking?No.....Yes.....
 27. Do milkers cleanse the teats and udders of the cows? No.....Yes.....
 28. Are the milking stools clean?No.....Yes.....
 29. Do milkers allow the fore milk to go into the can? ..No.....Yes.....
 30. Do they use milk on hands and teats when milking? ..No.....Yes.....

HANDLING OF MILK.

31. Is milk cooled immediately after milking?No.....Yes.....
 How?
 32. Name dirty habits noticed,
 33. Has diphtheria, tuberculosis, scarlet fever, typhoid fever, dysentery or any
diarrhoeal condition existed within the household or among the employees of
the dairy farm during the past year?No.....Yes.....If so,
which?Date of illness,

Doctor's name,

P. O. Address,

Remarks,

Signed,

H. O. Name,

District No.

County,Twp.,

ENGINEERING DIVISION.

EPIDEMIC OF TYPHOID FEVER IN ERIE.

Late in the month of January of the present year, the Board of Health of the City of Erie reported to the Department that Typhoid Fever was present to an unusual and alarmingly menacing extent and that representations to the city authorities were of no avail. The Commissioner, therefore, immediately, January 28th, dispatched Mr. F. Herbert Snow, Chief of the Division of Engineering, and Dr. B. Franklin Royer, Chief Medical Inspector, with a corps of assistants to take charge of the situation.

These officers found that one hundred and eighty-seven cases of the reported disease had been recorded during the previous month and that it was spreading at a rapid rate. Placards were at once posted warning the citizens against the use of unboiled water, the work already done by the local Health Department was reviewed and approved, and the temporary treatment of the water by copper sulphate was inaugurated. The public press was largely used to establish a general campaign of education.

The investigations of the Department set at rest all doubt as to the true nature of the disease and also confirmed the opinion of the Department Health Officer who was also the Health Officer of the city that the city water supply was seriously polluted and was the sole source of the outbreak. The city was districted, additional nurses were employed. Miss O'Halloran and Miss Gillespie of the Department corps of nurses were put in charge and an Emergency Hospital was opened with 23 patients on February 20th. The effect of the Copper Sulphate treatment of the water soon began to manifest itself. In the meantime the City Water Commissioners, having at length admitted the responsibility of the water, installed a hypochlorite plant with the permission of the Department which took the place of the temporary plant. The whole number of cases dropped from five hundred and twenty-one in February to one hundred and seventy in March, fifty-seven in April and seventeen in May when the epidemic was officially declared at end, the warning placards were removed and the public informed that the water was again potable. The total number of cases was 1,037 and the total number of deaths, 126.

An excessive typhoid fever rate has prevailed in Erie for many years and it is a significant fact that in the month of January both of the present year and that previous, scourges of so called "winter cholera" had prevailed to a most alarming extent. The city authorities therefore were not without warning of the dangerous condition of the water they were furnishing to the citizens.

Reports of the visiting representatives of the Department will be found later in this Report.

ACKNOWLEDGMENT OF THE BOARD OF HEALTH OF ERIE.

That the labors of the Department were effective and resulted in the saving of many lives and that they were appreciated by the citizens of Erie is sufficiently evidenced by the following acknowledgment from the Board of Health, forwarded by its President:

"The haste with which you dispatched your able body of assistants, under the direction of Chief Engineer Snow and Chief Medical Inspector Royer, and the thorough manner in which the work was begun by them, was an inspiration to our board and to our citizens, and the efficient manner in which their duties were carried on and completed was most commendable.

"The arrival at the same time of the Misses O'Halloran and Gillespie, the rapidity with which they organized the nursing force, who so completely cared for patients at their homes until hospital facilities could be provided, the manner in which they assumed charge of the Emergency Hospital and carried on its detailed work, have been sources of the greatest gratification to our whole community. That the outbreak was so promptly checked we attribute largely to the efforts of your department."

Finding that the work of the School Inspection undertaken at the instance of the Legislature was being seriously interfered with by a body calling itself the National League for (So-called) Medical Freedom, I addressed to all Boards of School Directors the following warning:

July 15, 1911.

To the President of the Board of School Directors:

Dear Sir:—I want to call your attention to the fact that the blank sent out some time ago from the National League for Medical Freedom was couched in such language that I find it has deceived many of those who received it, making the impression that it came from the State Department of Health. I hasten to assure you, therefore, that the Department of Health has absolutely nothing to do with the National League for Medical Freedom. The Department of Health stands for rational medicine and does everything it can to protect the people of the Commonwealth against uneducated medical pretenders. It is, moreover, greatly interested in trying to help the educators by improving the health of the children of the Commonwealth.

The medical school inspections such as are contemplated by the School Code would often protect the eyesight and aid the hearing of children, thus making study a pleasure and not a drudgery, would improve their health, enable them to take a higher stand in their classes and to be envied instead of despised. It would do much for education and for the health and happiness of our children, and in many instances would result in saving of life.

Regretting that any of the school directors of the State have been impressed with the idea that the Commissioner of Health or that the Department that he is charge of had anything to do with discouraging our educators from taking advantage of the opportunities the Governor has offered the children suffering from infirmities, I am,

Yours very respectfully,

(Signed)

SAMUEL G. DIXON.

THE ANTI-TUBERCULOSIS CAMPAIGN.

The present plan of the State Government Anti-Tuberculosis work may be summarized under the following headings:

First:—The collection and tabulation of facts relating to tuberculosis through official morbidity and mortality reports of each individual case.

Second:—The establishment of sanatoria for the treatment of curable cases, including infirmaries for advanced and hopeless cases.

Third:—The establishment in each county of one or more dispensaries for the care of cases which cannot avail themselves of sanatorium treatment, including home visitations, and the study of occupational and social conditions.

Fourth:—The maintenance of pathological laboratories for the examination of sputum and tuberculous lesions and biological laboratories for the development of immunitive and curative products.

Fifth:—The restriction of tuberculosis by the disinfection of rooms, buildings (private and public), conveyances, common carriers and by supervision and regulation of the general avenues of infection.

Sixth:—The Dissemination of knowledge relative to the communicability, care and prevention of tuberculosis.

INVESTIGATING THE RESULTS OF SANATORIUM TREATMENT.

The Sanatorium at South Mountain having been now in operation for five years, an opportunity exists for determining to what extent the efforts of the State to diminish the spread of Tuberculosis by that means have been justified by results. The following instructions for follow-up visits by nurses in cases discharged from Sanatoria were therefore issued to the Dispensary Physicians:

Dear Doctor:

We are enclosing a copy of Form 414 and shipping by express to your dispensary a number of these blanks.

You will please direct your dispensary nurses to visit all patients sent to the State Sanatorium at Mont Alto through your dispensary who have been discharged from the institution even though they may not now be under your care. Begin with those discharged six months or longer. Instruct your nurse to include this work with other visits when possible to do so. We are particularly anxious to know the present condition of every ex-patient in the Commonwealth. As rapidly as these blanks are filled by your nurses, forward them to the Medical Director of the Sanatorium at Mont Alto and file a duplicate in your dispensary.

Yours truly,

(Signed,)

SAMUEL G. DIXON.

The following is the form furnished for the use of nurses in obtaining statistical details for this purpose.

COMMONWEALTH OF PENNSYLVANIA—DEPARTMENT OF HEALTH.

—REPORT—

CONDITION OF EX-PATIENT.

Dispensary No. Date.....191.....
 Name Age M. F.
 Wb. Bk. S. M. W. Div. Sep. —
 Address, St.
 Town, County,
 Patient at Pennsylvania State Sanatorium at
 Admitted191.....No. of Admissions.....Classification.....
 Discharged191.....Result.....Reason.....
 Now Dispensary Patient, Yes: No. Classification.....Regular Attendant, Yes: No.
 Occupation prior to onset of illnessPresent Occupation.....

Indicate condition by (X). Leave other spaces blank.

Yes No More. Less Same

Remarks.

	Yes	No	More.	Less	Same	Remarks.
Cough,						
Expectoration,						
Short of breath,						
Blood in sputum,						
Appetite good,						
Indigestion,						
Diarrhoea,						
Hoarseness,						
Pain on swallowing,						
Night sweats,						

Weight: On discharge.....lbs. Present.....lbs.
 Temperatureat.....P. M.
 Pulseat.....P. M.
 Respirationat.....P. M.
 Frequent fever.....

Since discharge:

Hemorrhages, Yes: No: Number
 FrequencyAmounts
 Illness,
 Tuberculin treatment at San., Yes: No: How long
 Tuberculin treatment in Disp., Yes: No: How long
 Remarks:
 (Signed)Nurse.

	Before Illness	Present
Hours able to work,		
Hours work indoors,		
Place employment dusty,		
Average monthly earnings,		
Self supporting,		
Family income per month,		
Number to be supported,		
Habits, tobacco: None, Mod. Exc.,		
Habits, alcohol: None, Mod. Exc.,		
Hours in bed: Night,		
Hours in bed: Day,		
Separate bed,		
Separate room,		
No. windows in bedroom open,		
No. windows in bedroom closed,		
Hours in open air daily,		

House or room clean, Yes: No. Overcrowded, Yes: No.

Observance of instructions as to mode of life, etc.

Tuberculosis in immediate family:

RELATIVE	Age	Same or other Dwelling	Developed before or since Disch, fr. San.

Remarks: (Note especially patients general condition as it appears to you.)

.....

.....

(Signed) Physician in charge.

Sanatorium Case No.

Name,

Date of report, 191.....

After discharge..... Years Months Days.

Condition: Satisfactory: Retrogressive.....

(Leave above spaces blank for use at Sanatorium.)

Physicians in charge of Dispensary will please instruct Dispensary Nurse to inspect ex-sanatorium patients in March and September of each year.

Reports should be forwarded not later than April 15 and October 15.

Send reports to Medical Director of Sanatorium of which the patient was an inmate.

A copy of each report should be kept on file in the Dispensary.

Please review each report carefully before mailing and see that all questions are clearly answered.

Up to December 31, 1911, 6,496 patients have been admitted to the South Mountain Sanatorium near Mont Alto. The present capacity is 720. During the Spring of 1910 ground was broken for a second Sanatorium on the healthful tract of land at Cresson on the top of the Allegheny Mountains, which Mr. Andrew Carnegie so generously gave the Commonwealth for the purpose. Ground has also been purchased for the erection of a Sanatorium at Hamburg among the healthful hills of Berks County, which will be easy of access for the teeming population of Philadelphia and the eastern counties.

Pennsylvania may well feel proud of the work which it is accomplishing through its one hundred and fifteen tuberculosis dispensaries. Up to December, 1911, 40,091 indigent tuberculous sufferers had received medical aid and the attention of trained nurses which these dispensaries provide. The dispensary nurses are required to visit the homes of the patients and advise as to methods of personal hygiene and home sanitation.

TREATMENT OF THE GROUNDS AT THE SOUTH MOUNTAIN SANATORIUM FOR TUBERCULOSIS.

Report of ELIZABETH LEIGHTON LEE, Landscape Architect.

Plans for the decorative Planting of the Grounds of the Pennsylvania State South Mountain Sanatorium for Tuberculosis, at Mont Alto, were completed in the present summer.

Two visits were made by the Landscape Architect. The first, after making a preliminary study of the map of the grounds, on September 12th, 1910, in order to obtain a general idea of the possibilities, the surroundings and best development. The second, after making tentative plans, on May 8th, 1911, to check up and confirm the advisability of the conceived arrangement.

The general scheme of planting adopted, after consulting with the Commissioner of Health, was that the buildings should be given a setting by the use principally of native shrubs, largely such as could be collected from the surrounding woods. No large shade trees to be used on the grounds because they would interfere with the sunlight. Vines to be few and when used to be kept cut back to the base of the house. Shrubs and plants to be used sparingly close to any houses used by the patients, and generally not in such positions. A few buildings and unsightly objects to be blocked out from certain points of view.

It will readily be seen that the necessity of curtailing the use of trees in the interest of health is seriously hampering to the best effect of buildings and grounds taken as a whole. More latitude was

used in the placing of shrubs near buildings used by the physicians and nurses than in those used by patients, but even in such positions few trees were used, and none close to buildings.

In all, seven sheets of plans were made, and all were reduced or enlarged to the same scale of 20 feet to the inch, in order to simplify working with them in the ground.

PLAN NO. 1. Planting in the vicinity of Twin Cottage, Shrubs, vines and one or two trees used at the base of the three houses, these houses being used by physicians and nurses. Blocking out a portion of the stable from the three points of view. Native rhododendrons and dogwoods principally, used in the semi-circle in front of Twin Cottage. This should be an effective planting with the woods as a background.

PLAN NO. 2. Planting adjacent to Nurses and Physicians Building, the Administration Building, and the Children's Building. Shrubs near the Children's Building were kept six feet away from the base of the building, and rather thorny types used in order to prevent their destruction. Some planting had already been made near the Administration Building. Cherry trees were placed between the tennis courts and the road, and shrubs in the corners of the turn of the drive.

PLAN NO. 3. Groupings of shrubs between the south side of the road and the north side of the drive. Some of the groups were placed so as to screen unsightly objects on the opposite side of the road. As a general rule varieties of the same botanical family were placed in one group, as, one large group of dogwoods of various kinds, one group of thorns, etc. Dogwoods and hemlocks were used largely in a group near the proposed entrance gates.

PLAN NO. 4. The Chicken Yard and corners adjacent to Forney's property. Varieties of the Abundance Plum used in the Chicken Yard. The trees to shade the chickens and the chickens to eat the insects which drop from the trees.

Hemlocks and pines for the corner screens, and a row of pear trees along the road near the Chicken Yard.

PLAN NO. 5. Surroundings of the Dining Building. Large groupings of shrubs were used in the turn of the drive, for a setting to the building. Some few on the south side, and in the corners of the lot a few white pine trees.

PLAN NO. 6. The new Chapel, the Old Administration Building, and Dispensary. Planting of shrubs at the side of the old Administration Building, and in the chapel lot more planting was given than elsewhere although not in such a way as to deprive the building of sunlight.

A small amount of planting of shrubs was placed each side of the high flight of steps at the north of the dispensary, and the open space at the south was treated as a small park consisting of grass in the center, bordered by plants and shrubs and surrounded by a hedge.

At some future date a concrete pool either in the center of this open space, or in the turn of the drive in front of the Dining Hall would be a most effective feature. Gold Fish in the pool would prevent the hatching of mosquito larvae.

PLAN NO. 7. Planting around the Infirmary and the Nurses Building, the bare rocks at the rear and the open space in front of the Infirmary. Close to the Infirmary it is planted very sparingly with very low plants. By the Nurses building, Lilacs, Climbing Roses and Spirea have been used. Seeds of plants which will naturalize themselves in the crevices of the rocks are to be scattered in any place among the rocks which will admit of such treatment, together with some plants and vines that will spread by seed or stolon.

Across the road the open space is treated as a park, with groupings of native Rhododendrons, Dogwoods, Hemlocks and Laurel.

DIVISION OF LABORATORIES AND EXPERIMENTAL STATION.

THE DISCOVERY OF AN ORGANISM IN THE BLOOD OF ACUTE CASES OF POLIOMYELITIS.

In examining in the Laboratories of the Department the blood from acute cases of Poliomyelitis in human beings, and also in monkeys, in which the disease was induced for purposes of experi-

ment, an organism was discovered on March 2, 1911 differing in morphologic characteristics from any heretofore described. This may or may not prove to be the etiologic factor in the causation of the disease, but it is present in every specimen examined and is certainly characteristic. It was therefore considered of sufficient interest to warrant the publication of the fact and its distribution to other observers. Success in isolating the organisms has not yet attended our efforts.

The following announcement was at once made:—Micro-Organism found in the blood of acute cases of poliomyelitis.

In examining the blood from acute cases of Poliomyelitis in the human beings and also in monkeys in which the disease was produced experimentally an organism was found, different in morphologic characteristics from any heretofore described which may or may not, on further investigation, prove to be the etiological factor in the causation of the disease. Blood smears being fixed in methyl alcohol for one minute and stained with carbolthionin, the organism appears as a faintly stained blue rod with regular cell wall about ten microns long and about .8 microns in width, curved at an angle of sixty to seventy-five degrees at one end, occasionally at both ends. At times, the curved end is bulbous. Some of the organisms appear to have a very finely granular protoplasm when the highest amplification is employed. They may be discerned by means of a 4 m. m. dry objective but their characteristics are much more satisfactorily delineated under the 1-12 oil immersion lens. They are found free in the serum as well as within the body of the red blood cell.

The organisms do not retain the violet color when stained by the method of Gram but assume the color of the counter stain which, as generally used in this laboratory, is a very dilute solution of carbol fuchsin.

The bloods examined were from ten different cases of acute Poliomyelitis in children and were taken during the epidemic of last summer and autumn, and from thirteen cases of the disease during the acute stage, which had been produced experimentally in as many monkeys.

Blood smears from three normal beings were carefully examined and although the search for these organisms was diligently made, none were found. Smears were made from the bloods of thirteen normal monkeys with negative results. After inoculation with the virus these same monkeys gave positive results. The blood of other normal monkeys gave negative results.

Blood smears were stained with iodine and sulphuric acid in order to test the organisms for cellulose, but no blue stained organisms were seen.

Smears from the cords and brains of paralyzed monkeys, and from one human case were examined but none of new organisms were found.

Filtered virus stained with carbol-thionin and by Gram's method showed none of these organisms.

Defibrinated blood, three weeks to two months old from two paralyzed monkeys showed the forms in increased numbers.

Cultures made from the blood of a paralyzed monkey in blood bouillon, plain bouillon, and blood agar, examined after having been inoculated three weeks, showed the presence of the organism in increased numbers. Dorsett's egg medium was inoculated with the same blood at the same time but the organism was not found in smears from the surface of the medium or from the water of condensation.

We have searched without success for moving organisms in fresh blood, in old tubes of defibrinated blood from paralyzed monkeys, in blood bouillon, plain bouillon, serum bouillon cultures three weeks old and in the condensation water in three weeks old cultures on Dorsett's egg medium under dark field illumination.

Success in isolating the organisms has not attended our efforts as yet.

Samuel G. Dixon, M. D.,

Herbert Fox, M. D.,

James B. Rucker, M. D.

POSSIBLE RELATIONSHIP BETWEEN TUBERCLE AND CANCER.

Another important investigation was made in our laboratories to determine whether a relationship exists between the germ of tuberculosis and the cancer cell. While definite results were not reached, the studies are of an interesting character and justify further research. A full account of this research was published simultaneously in a Bulletin of the Department and in the Journal of the American Medical Association. The scientific research work and the diagnosis of pathological conditions and the examinations of water for infection, have been greatly increased over any other year in the life of the Department.

POLIOMYELITIS.

The wide spread of acute epidemic Poliomyelitis which took place in the United States during the summer of 1910, extending to a less degree into the present year, naturally called for the observation of the medical profession all over the country and was referred to a committee of the American Medical Association for report. As one of that Committee I shared in the compilation of a report which was published under the title of "Report of Committee on Methods for

the Control of Epidemic of Poliomyelitis." The additional members of the Committee were W. H. Frost, M. D., of the U. S. Public Health and Marine Hospital Service, and H. D. Hill, M. D., D. P. H., of the Minneapolis State Board of Health. This report will be found later in the volume.

The following decision is of value to all health officers and school authorities throughout the State.

Decision of the Supreme Court of Pennsylvania sustaining the Department of Health in the form of Certificate issued for the Vaccination of School Children, rendered January 3rd, 1911.

Lee v. Marsh.

230th Pennsylvania State Reports, page 351.

Appeal No. 203 October Term 1910, from decree of Common Pleas No. 2, Allegheny County No. 956 January Term 1909. Opinion of Justice Shafer.

(Page 356) "Without undertaking to discuss in detail the exceptions to the findings of fact and conclusions of law, we are of opinion that the whole case really turns upon what is the meaning of the term "vaccination" as used in the Act of 1895, which prohibits the attendance of a child at school without a certificate of successful vaccination, or of its having had smallpox. The ordinary and usual meaning of "vaccination," and the sense in which it must be supposed to have been used by the legislature, is inoculation with the virus of cowpox for the purpose of communicating that disease as a prophylactic against smallpox. It indicates an operation and not a result. If a person should take cowpox by milking cows, or otherwise, or from contact with the disease he could not be said to have been vaccinated. The operation is comparatively old, having been in use for over 100 years, and during that time has always consisted of inoculating the body, that is, grafting upon it the disease, by inserting the virus under the skin, and the test of its success has always been considered to be the appearance of the symptoms of the disease including those which manifest themselves on the skin.

It appears in this case that for some years past another method of guarding against smallpox has come into use more or less extensively, which as we understand it, consists in attenuating to a high degree the virus of smallpox, or of cowpox, the attenuation of the virus of smallpox being called variolinum, and that of cowpox, vaccinium, and administering one or the other of these substances by the mouth, and it is claimed that in this way there are produced in the body practically the same symptoms as are produced by vaccination except the exterior and local inflammation, and that either of these methods has the same preventive virtue as ordinary vaccination. From what is known of the use of toxins of other diseases this would seem to be possibly true, but whatever it may be, and whatever the result may be, it is not vaccination as the term is used in the Act. The term "vaccination," however, appears to be used by some physicians at least, as a general term for the introduction into the body, by any method, of any kind of virus as a preventive of disease, and it is plain that in this case the physician who certifies to the successful vaccination of the plaintiff used the term in this general sense and not in the sense of the Act. In order, therefore, to guard against such ambiguous use of the term by which the Act would be evaded, the Health Department, under the terms of the Act of 1905, prescribed a form of certificates which would prevent such ambiguity, and the requiring of that form is really what is complained of in this case. It was strenuously argued that the authority given by the Act of 1905 to the Health Department to fix forms of certificates is a delegation of legislative power, and if it is claimed to authorize that Board to require safeguards against disease which the Act does not substantially require, it would be open to that objection. But all we understand the Act of 1905 authorizes, and all that the Department has done in this case, is to regulate the form of the certificate so as to prevent ambiguity, and to require the certifying physician to use words in the same sense with which they are used in the Act.

For these reasons we are of opinion that the certificate required by the Board of Health was lawfully required by them, and that its use is obligatory.

The exceptions are, therefore, dismissed.

And now, to wit, September 10, 1910, this cause came on to be heard, having been argued by Council upon bill, answer, replication and testimony, the court having filed its findings of fact and conclusions of law and having passed upon the exceptions thereto filed by the plaintiffs and upon consideration thereof, it is now ordered, adjudged and decreed that the injunction heretofore granted be dissolved and the bill of complaint filed in this case be dismissed at the cost of the plaintiffs."

(Page 359) Per Curiam January 3, 1911:

"The decree in this case is affirmed at Appellants' costs and on the opinion of the court below dismissing the exceptions to the findings of fact and conclusions of law of the judge specially presiding.

ADDRESSES, CONFERENCES AND CONVENTIONS.

ANNUAL MEETING OF THE LEHIGH VALLEY MEDICAL SOCIETY.

On January 26, 1911, I delivered an address on "Pennsylvania's Standing Army of Health" before the annual meeting of the Lehigh Valley Medical Society at Wilkes-Barre.

OSTEOPATHIC MEDICAL SOCIETY OF PHILADELPHIA COUNTY.

By request of this Society, an address was delivered before them March 23, 1911, at Philadelphia by Dr. B. Franklin Royer, representing the Commissioner, on "The Rules and Regulations of the Department of Health as applied to physicians and the relations that physicians bear to the Department."

PENNSYLVANIA FISH PROTECTIVE ASSOCIATION.

On March 25, 1911, Dr. Royer also represented the Commissioner at the annual meeting of this Association, taking part in their deliberations.

CHESTER COUNTY HOSPITAL ASSOCIATION.

On May 5, 1911 Dr. C. J. Hunt represented the Commissioner at a meeting of this Association at West Chester, delivering an address on "Public Health Work in the Commonwealth of Pennsylvania."

AMERICAN MEDICAL ASSOCIATION.

The American Medical Association held its annual meeting at Los Angeles, California on June 27th. I prepared a paper on the subject of "Poliomyelitis in Pennsylvania" which was read for me by Dr. Karsner, as I was prevented by official engagements from attending.

STATE COLLEGE.

On July 5, 1911, a summer "Conference of Rural Conditions" was held at State College. I was represented on this occasion by Dr. Thomas H. A. Stites, Medical Inspector of Dispensaries, who delivered an address on "The State's Relation to the Community and Public Health."

MEETING OF THE SIXTEENTH SENATORIAL DISTRICT.

Before this body, Dr. Stites delivered an address on "The State's Campaign against Tuberculosis in Pennsylvania," on August 15, 1911.

MEDICAL SOCIETY OF THE STATE OF PENNSYLVANIA.

Before the annual meeting of the State Medical Society at Harrisburg, September 26, 1911, I delivered an address on "Pennsylvania's Work on Poliomyelitis."

SPECIAL MEETING OF THE SCHUYLKILL COUNTY MEDICAL SOCIETY.

On Tuesday, November 14, 1911, Dr. Charles Jack Hunt, Associate Chief Medical Inspector, represented the Commissioner in an address before a special meeting of the Society, on the subject of the Administration of the State Department of Health.

THE CO-OPERATION OF THE MEDICAL PROFESSION.

A brilliant popular writer and dramatist has recently placed physicians in so unfavorable a light—so far from the truth—that I feel constrained to utter my protest against his calumnious utterances. Taking advantage of the well known fact that it is not to the advantage of the family doctor to diminish the prevention of disease, he jumps to the conclusion that he therefore makes no attempt to do so, that he allows the interest of his pocket to be the mainspring of his conduct. The charge is a spurious one as proven by the innumerable ways in which the physicians of Pennsylvania and, I doubt not, of every State, are taking an active part in the preventive medical work that the State Government is doing. What warmer supporter has the general campaign against Tuberculosis than the regular family physician? Who more than he is aiding us to teach the people how to avoid typhoid fever themselves, and how to prevent the spread of the disease by proper sanitary measures. Physicians are constantly assisting us in acquiring scientific data that will better enable us to prevent disease. Their willing and helpful response is a complete answer to Mr. Shaw's gratuitous indictments that just as the best carpenter or mason will resist the introduction of a machine that is likely to throw him out of work so the doctor will resist any advance of science that threatens his income. Mr. Shaw's insulting insinuation is based upon the mistaken assumption that medicine is a trade not a profession.

GRATIFYING COMPLIANCE WITH LAWS AND REGULATIONS.

I have been gratified to notice that one of the means by which tuberculosis has been spread in the past has been diminished to a notable extent in obedience to the law of the State; I refer to the habit of spitting in public places. This is especially noticeable on railway cars and about stations and platforms. As compared with other states through which I have traveled the difference in this respect has been distinctly apparent. Another nuisance which is to be objected to on the same ground is the habit of pullman car porters of dusting off the clothing of passengers right in the aisles and in the face of the other passengers. This also has been partially

abated since the Department took objection to it. This and other observations *en route* made me feel very proud of the way in which our people are complying with the necessary health regulations.

REPORT OF THE COMMITTEE OF THE AMERICAN MEDICAL ASSOCIATION ON METHODS FOR THE CONTROL OF EPIDEMIC POLIOMYELITIS.

Committee: W. H. Frost, M. D., U. S. Public Health and Marine Hospital Service, Washington, D. C.; H. W. Hill, M. D., D. P. H. Minnesota State Board of Health, Minneapolis; Samuel G. Dixon, M. D., Pennsylvania State Department of Health, Harrisburg.

Within the last two years the attention of the medical profession has been strongly directed to the prevention of poliomyelitis, first, because of its increasing prevalence in epidemic form and the serious nature of its after-effects; and, secondly, because it has been shown to be an infectious disease due to a filterable virus, probably a specific microorganism, from which the inference has been very naturally drawn that it is necessarily preventable.

As regards its prevalence, there can be no doubt that it has very greatly increased in recent years, especially in the United States. During the year 1909 not less than 2,500 cases were reported as occurring in epidemics in the United States. During that year 539 deaths, indicating probably not less than 5,000 cases, were reported from the registration area comprising 55 per cent. of the population of the United States.

For the year 1910, 5, 093 cases and 825 deaths have been reported to the Surgeon-General of the Public Health and Marine-Hospital Service from thirty-one states, the District of Columbia and Hawaii. It can hardly be doubted that these statistics give a very imperfect and much too low estimate of the prevalence of the disease. Granting, however, a prevalence several times as great as reported, a mortality of 5 to 20 per cent., and permanent disability in perhaps 75 per cent. of the survivors, still the magnitude of the public health problem involved has undoubtedly been greatly exaggerated. Compared with the ravages of tuberculosis, pneumonia, typhoid fever, infantile diarrhea, scarlet fever, diphtheria, measles, whooping-cough, and even of such a comparatively rare disease as cerebrospinal fever, the havoc wrought by poliomyelitis on the country at large, while not negligible, is yet very small.

* Read in the Section on Preventive Medicine and Public Health of the American Medical Association, at the Sixty-Second Annual Session held at Los Angeles, June, 1911.

As regards its preventability also there has seemingly been some hasty and unwarranted optimism. Inferences drawn from laboratory studies of experimental poliomyelitis have been applied to the disease as occurring in nature with too little consideration of the vast differences between laboratory and natural conditions. While laboratory experiments have, it is true, furnished indications not only that poliomyelitis is preventable, but also to some extent of the methods by which its prevention may be accomplished, the final proof of preventability, namely, demonstrable control of the disease, is still lacking.

In the absence of data as to the actual efficacy of preventive measures, the present report must necessarily be drawn up on theoretical grounds, from data which are, in some essential respects, deficient. The facts needed for the deduction of effective preventive measures for an infectious disease include the following or a close approximation to them:

1. A knowledge of the specific causative agent—its habitat, the conditions necessary for its life and propagation, and the agencies by which it may be destroyed.

2. A knowledge of the means by which the causative agent may be and most commonly is transmitted from its habitat to healthy persons, and the avenue by which it gains entrance to the human body.

3. A knowledge of the conditions which constitute susceptibility to infection by the agent when it has been introduced into the body.

The knowledge of these facts may be effectually applied to the prevention of the disease, provided that the causative agent can be controlled or destroyed in some part of its life history, or that immunity to the infection can be established by measures of practical application.

As a preliminary to the presentation of any recommendations regarding methods for the control of poliomyelitis, it seems necessary to summarize as briefly as possible the essential facts known concerning its etiology and dissemination.

I. EXPERIMENTAL STUDIES.

1. *The Specific Causative Agent or Virus.*—The successful transmission of poliomyelitis from man to monkeys, and from monkey to monkey, has demonstrated that the disease is due to a specific virus which passes readily through a bacteria-proof filter. Several observers have reported the demonstration of minute bodies in the filtrate from emulsions of the cord of infected monkeys. Much larger bodies have been found by the Pennsylvania health authorities in the blood of infected persons and monkeys. It has not, however, been established that the bodies demonstrated either in the blood or in the filtrates are the causative organisms.

Although the virus has probably been cultivated on artificial media, such cultures offer no practical aid to its isolation or identification.

Its recognition, therefore, depends solely on the characteristic effects produced in animals.

2. *Habitat of the Virus*.—The virus of poliomyelitis has been shown to be present in the following locations:

A. In man: In the spinal cord and bulb (and possibly in the spleen, blood and cerebrospinal fluid) of persons who have died during the acute stage of the infection.

B. In lower animals: In monkeys experimentally infected the virus has been found in the brain, spinal cord, mesenteric, axillary and salivary glands, and in the nasal and pharyngeal mucous membrane. It has been found in the blood and cerebrospinal fluid only in the early stages of infection, and apparently in great dilution. In the nasopharyngeal mucous membrane it has been found to persist for as long as five months after the acute stage of the infection.

Several observers claim to have reproduced the disease in rabbits by inoculation with human virus and to have propagated the infection thence to other rabbits and to monkeys. Some doubt, however, remains concerning the transmission of poliomyelitis to rabbits. The majority of observers have found them insusceptible, and those who have reported success in transmitting the disease have failed to find characteristic histologic lesions. With the exception of these somewhat doubtful demonstrations in rabbits, the virus has not been found in lower animals other than experimentally infected monkeys. Inoculations of other varieties of laboratory and domestic animals have given only negative results. None of these animals (guinea-pigs, rats, mice, dogs, cats, sheep, goats, hogs, horses, chickens and pigeons) has so far been found susceptible to the disease. Also, pathologic and experimental studies on mammals and fowls suffering from paralysis similar to human poliomyelitis have failed to establish any etiologic relation between such diseases and poliomyelitis.

C. Outside the animal body. The virus has never been found outside the animal body. Its demonstration in the nasopharyngeal mucous membrane and salivary glands of experimentally infected monkeys has led to the inference that the nasal and buccal secretions contain the virus. However, experiments made to demonstrate the infectiveness of these secretions, as well as of the urine and feces of infected persons and monkeys, have been uniformly unsuccessful.

3. *Viability of the Virus*.—Studies on viability have been necessarily confined to animal tissues containing the virus. Under these conditions the virus has been found easily destroyed by heat (45 to 50 C.) and by comparatively weak disinfectants. It has been found resistant to low temperatures, disiccation and the action of glycerin.

4. *Vehicles of Transmission and Avenues of Infection*.—Since the virus has been found only in the tissues of naturally infected persons and experimentally infected animals (of a species which cannot

be considered of importance in its natural transmission), the carriers of the infection outside the human body can only be inferred from the biology of the virus and the epidemiology of the disease. Laboratory studies so far indicate (although they do not prove) that the virus has no natural animal host except man, and that its viability outside the human body is short. To that extent they indicate direct transmission from person to person.

Possible avenues of infection experimentally demonstrated are numerous. Monkeys may be infected by inoculation into the brain, cerebrospinal canal, peripheral nerves, vascular system, peritoneal cavity, anterior chamber of the eye, or subcutaneous tissue. They have been infected through the digestive tract by introducing massive doses of the virus into the stomach or intestines, peristalsis being retarded by the administration of opium. Through the respiratory tract infection has been caused by rubbing the virus into the scarified nasal mucous membrane, and in one instance through the intact nasopharyngeal mucosa.

5. *Susceptibility*.—Laboratory experiments have thrown practically no light on the conditions determining natural susceptibility or immunity to the infection. Monkeys are almost uniformly susceptible to artificial infection by inoculation. They have not, however, been known to contract the disease spontaneously, although in several laboratories considerable numbers of them have been kept in contact with artificially infected monkeys. Acquired immunity, both active and passive, has been shown; but no practical means of immunizing persons has been developed. The susceptibility of monkeys may be diminished by the administration of hexamethylenamin, and it is reasonable to infer that this may apply also to human beings.

II. EPIDEMIOLOGIC STUDIES.

Satisfactory epidemiologic data from which to draw inferences as to the transmission of poliomyelitis are scant. Such data are lacking, both in extensiveness, failing to give an accurate idea of the prevalence and distribution of endemic and epidemic cases, and also in accuracy of detail, failing to give full enough information concerning the cases studied.

The following important facts are, however pretty well established.

1. *Geographic Distribution*.—Epidemics have occurred over a very wide, not definitely limited area, including all sections of the United States, various parts of Canada and the West Indies, most if not all the European countries, Australia and Micronesia. Sporadic cases are of even wider distribution.

The distribution of epidemic areas is quite peculiar, showing no constant definite relation to previous epidemic foci, to density of population or to the amount of communication by travel. In general, it is true that densely populated cities suffer relatively less than rural

districts. Epidemics have sometimes appeared to be confined to certain water-courses, and investigations in Pennsylvania seem to show a greater prevalence of the disease over old formations, poorly drained, than over gravel formations, but no constant relation has been shown to exist between topographic or telluric conditions and the occurrence of epidemics.

2. *Seasonal Prevalence.*—In the northern hemisphere the disease is markedly more prevalent during the summer and fall months; in the southern hemisphere during the winter and spring. In general, hot, dry weather seems to be one of the conditions most favorable for its spread.

3. *Incidence of Disease Among Population.*—The total attack-rate in the population of any considerable area is always small. It is seldom that more than one to ten per thousand are attacked, and even this latter rate is not often reached in a population of more than a few thousand. The greatest incidence, both actual and relative, is in the first decade of life, usually from the second to the fifth year. The proportion of adults to children attacked varies greatly, however, in different epidemics. More males than females are attacked. Such statistics as are available indicate that during the first decade of life males and females are attacked at approximately the same rate, but that in later life males are attacked much more frequently.

4. *Origin and Means of Dissemination of Epidemics.*—None of the epidemiologic investigations undertaken can be said to have shown the origin and means of dissemination of epidemics. Practically all observers have failed to find any relation between the spread of the disease and certain factors commonly operative in the dissemination of many infectious diseases, namely, food and water-supplies, crowding and insanitary environment.

Regarding other factors, findings have been various and opinions divergent.

A. *Contagiousness. Direct Transmission from Person to Person:* The most comprehensive and in many respects most reliable information on this point is derived from a study of the attack-rate in persons known to have been in intimate contact with recognized acute cases. A study of multiple cases in families, institutions and schools shows that only a small proportion of persons known to have been in such contact have subsequently developed the disease. Therefore, if we limit recognized cases to persons with actual paralysis, it must be admitted that the disease is usually very slightly contagious as compared with scarlet fever, measles, diphtheria or typhoid fever.

On the other hand, studies of small outbreaks have not infrequently shown indications of direct transmission, and occasionally an apparently high degree of contagion. This is especially true in instances in which abortive cases have been included in the epidemiolo-

gic studies. Studies of this kind are, however, too few to furnish a basis for general conclusions and to eliminate the error introduced by personal bias in the inclusion of abortive cases.

For the present it may be concluded that few clinically recognized cases can be traced to contact with previous clinically recognized cases. If the disease is transmitted by direct contact, paralytic cases must be a small factor in its dissemination.

Factors of possibly greater importance are:

1. Abortive and Clinically Unrecognized Cases: The existence of such cases, often so mild as to be ambulant, has been inferred on clinical evidence and confirmed by the demonstration of apparently specific microbicidal properties in the blood serum of a number of suspected cases.

2. Carriers: The experiments of Osgood and Lucas, and of Flexner and Clark, demonstrating that the virus may persist in the nasal mucous membrane of artificially infected monkeys for several weeks—in one instance as long as five months—indicate the probable existence of human chronic (convalescent) carriers. The existence of healthy carriers—persons in whose bodies the virus multiplies without causing infection—can only be surmised at present. Numerous cases are cited in which infection has apparently been conveyed by a healthy intermediate person. The epidemiology of cerebrospinal meningitis has been interpreted as offering an analogy to this method of transmission, furnishing an example of a disease spread by healthy carriers, whose number has in many instances appeared to be greater than the number of persons actually suffering from the disease.

The presumption of healthy carriers, namely, persons harboring the germs but not suffering from the infection, carries with it as a necessary corollary individual variations in susceptibility. The existence of abortive cases, while not proving this assumption, tends to confirm it. The uneven distribution of the disease in different age groups and between males and females, and also its seasonal distribution, suggest variations in susceptibility as their explanation. To offer variations in susceptibility as an explanation of the irregular incidence of the disease is, however, begging the question unless some satisfactory demonstration of such variations can be offered at the same time. It is reasoning in a circle to advance a variable factor of susceptibility in explanation of the irregular incidence of a disease and then to advance the irregular incidence as a proof of variable susceptibility. Satisfactory proof that susceptibility to poliomyelitis varies to any considerable extent is lacking. While, therefore, it is reasonable to suppose that the element of individual susceptibility is a factor in the epidemiology of this disease, its importance is as yet undetermined.

The digestive tract as the avenue of infection is suggested by sev-

eral facts, namely, the seasonal prevalence, the greater incidence in childhood and the early and almost constant occurrence of gastrointestinal symptoms in the acute stage.

On the theory of poliomyelitis being directly transmissible from person to person, it is difficult to offer a satisfactory explanation of its uneven distribution in relation to density of population and travel.

B. Theories explaining the dissemination of poliomyelitis by agencies other than direct transmission from person to person are worthy of careful consideration. Of these theories, the one which appears to the committee to have the best basis of fact assumes that the disease is transmitted from lower animals to man. This theory is supported by the occurrence among domestic animals (horses, dogs, cats, sheep, hogs, cattle and poultry) of paralytic diseases clinically resembling acute anterior poliomyelitis. Experimental studies have so far failed to show that such diseases are in any way etiologically allied to the human disease and have, on the other hand, shown that these animals are insusceptible to inoculation with the virus derived from human cases.

The distribution of paralytic diseases in animals in relation to human poliomyelitis has not been determined with all desirable accuracy, and it is therefore impossible to state at present how closely it corresponds to the distribution of human poliomyelitis.

It has been suggested that the disease is conveyed from horses to man by dust from barnyards and streets. The evidence in favor of this theory is as follows:

1. The greater frequency of the disease in the country and in small villages than in more densely populated cities where, as a rule, streets are better paved and less-dusty.
2. Its greatest prevalence during the season when dust is generally most prevalent.
3. Its greatest prevalence among children at the age when they commonly play in the dust, and its greater prevalence among adult males, who are relatively more out of doors than in females who are more intimately exposed to contact with the sick.
4. The distribution of cases in several towns on the more dusty streets; and the cessation of several epidemics after sprinkling the streets.

The probability of some insect being a factor in the transmission of poliomyelitis has been suggested by several epidemiologic observations, namely:

1. A seasonal prevalence corresponding to the maximum prevalence and activity of many varieties of insects.
2. The irregular distribution of epidemics. Outbreaks have occurred simultaneously or consecutively in localities separated by wide, often densely populated and much-traveled areas in which the disease has not been epidemic.

3. The relatively greater prevalence of the disease in rural communities and in small towns than in large densely populated cities, where the opportunities for the spread of diseases transmissible directly from person to person are generally greater.

4. The absence, in epidemic areas, of any constant and obvious relation between cases in regard to proximity, inter-communication or exposure to readily discernible common sources of infection.

Such peculiarities in the epidemiology of poliomyelitis have been thought by some to be most readily explained by the assumption that some insect, showing corresponding peculiarities in its distribution and activities is a necessary factor in the spread of the disease. Dr. Conn of the Connecticut State Board of Health has recently suggested the flea as a probable carrier of the infection. It is doubtful, however, whether all the facts known concerning the biology of the flea are in accord with this hypothesis.

III. RECOMMENDATIONS.

The committee recommends, as the most important step toward the prevention of poliomyelitis, further studies of its means of transmission and of the factors of immunity.

While it is hoped that experimental studies on the transmission of the disease will be continued and will be as productive of results in the future as in the past, neither recommendations nor prophecies in this regard come within the scope of this report.

The collection of data which it is believed will greatly enlighten the question, and the collection of which is quite practicable, is recommended as follows:

1. *Prevalence.*—It is obviously of the greatest epidemiologic importance to determine as accurately as possible the prevalence and distribution of the disease. This can be accomplished most efficiently and thoroughly through state and municipal health organizations, by requiring that poliomyelitis be reported as an infectious disease. In the absence of any definite diagnostic criterion except paralysis, reports could, for the present, be required of paralytic cases only. It is desirable, moreover, that morbidity and mortality statistics should, for the present, be based on definitely diagnosed paralytic cases. Abortive cases should be included wherever practicable in the statistics of the disease, but should be designated as such and tabulated separately.

2. *Diagnosis.*—Further and more detailed studies of the symptomatology and of the blood and cerebrospinal fluid of patients in the preparalytic stage and of suspected abortive cases are needed to establish a more definite standard of diagnosis. For collective studies of this kind local medical societies have opportunities which are rarely available to public health organizations.

3. *Epidemiology.*—In connection with the collection of morbidity reports, state and municipal health authorities can, by obtaining

more detailed reports, collect data of considerable epidemiologic importance. Valuable studies based on data so collected have already been made by several state and city health organizations and by medical societies. The value of the data so collected would be much increased by greater uniformity in the methods of collecting them. The employment of a uniform blank for this purpose is recommended.

It is necessary, however, for a better understanding of the transmission of the disease, that such studies be supplemented by more detailed information, based on a systematic epidemiologic study of individual cases by competent epidemiologists. Studies of this nature have already been undertaken in several states and have resulted in the collection of the most thorough, instructive and satisfactory data so far available.

The objects of an intensive study should be to determine as accurately as possible:

1. Clinical types with special reference to early diagnosis with the aid of laboratory methods.
2. The actual prevalence of the disease in each community studied. This would necessitate an investigation not only of definite paralytic cases, but also of suspected abortive cases.
3. The distribution of cases and their relation to each other and to possible common causes. Among the etiologic factors other than direct contact which deserve especial study are: the prevalence of paralytic diseases among animals; meteorologic conditions, especially the prevalence of dust; immediate environmental conditions with special reference to crowding, sewage disposal and the presence of insects; food and water-supplies; the prevalence of other diseases.

Pending the results of further investigations, the committee recommends the following preventive measures based on the assumption that the disease is directly transmissible from person to person.

1. Isolation and screening of all patients known to have or suspected of having the disease. Since a positive diagnosis can be made only on the appearance of paralysis, which usually develops one to six days after the onset of febrile symptoms, and in abortive cases does not appear at all, isolation, to offer any hope of effectiveness, must be instituted on suspicion. Three weeks from onset is suggested as the period of isolation, although only a surmise can be made on this point.¹
2. Disinfection of all discharges from patients, and of all articles used by them and their attendants.
3. Fumigation of the premises with formaldehyde on release from isolation.²

1. In the opinion of one member of the committee (H. W. H.) a period of two weeks is sufficient to meet the situation as we understand it.

2. In the opinion of one member of the committee (H. W. H.) terminal fumigation is unnecessary. In the present status of our knowledge concurrent disinfection, i. e., disinfection of the discharges of the nose and mouth, should be rigidly carried out.

4. A quarantine of persons in contact with patients does not seem at present justifiable. It is recommended, however, that members of patients, families be excluded from schools during the period of patients' isolation and during the possible incubation period of a new case; that is, for three weeks following the end of the last exposure to the (presumptively) contagious person.

5. For the protection of persons presumably exposed to infection, namely, those in contact with the sick and in communities where the disease is epidemic, the daily administration of hexamethylenamin seems to offer some hope of reducing susceptibility. It seems not unreasonable to suppose that susceptibility, especially of young children, may perhaps be further modified by preserving the gastro-intestinal tract in normal condition, by avoiding dietetic errors, by prompt attention to slight gastro-intestinal disturbances and by the avoidance of overexertion in hot weather. Rest, which seems to be an important therapeutic measure, may quite possibly have some prophylactic value.

The committee is unable to express any great confidence in the efficacy of the measures above outlined. Even granting that the disease is transmitted directly from person to person by infectious secretions, the difficulties in the way of its prevention are great.

It is often impossible to recognize even severe paralytic cases before the onset of paralysis, which may be several days after the onset of the disease. It is still more often impossible to recognize and isolate abortive cases, whose number may reasonably be supposed to be considerable. Chronic convalescent carriers, whose existence is probable, and healthy carriers, whose existence is not improbable, are not recognizable and hence cannot be controlled.

Moreover, the disease is already wide-spread throughout the country, and experience with other infectious diseases has shown the difficulties which beset the eradication of a wide-spread endemic infectious disease by quarantine alone. Finally, it will be difficult to estimate the efficacy of preventive measures, since it is impossible to foretell the extent to which the disease is likely to spread in any community without the application of restrictive measures.

If, however, the above measures actually prevent even a small proportion of cases they are justified.

W. H. FROST, M. D.,

U. S. Public Health and Marine-Hospital Service, Washington, D. C.,

H. W. HILL, M. D., D. P. H.,

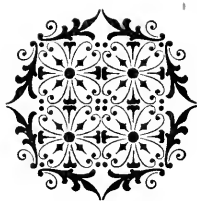
Minnesota State Board of Health, Minneapolis,

SAMUEL G. DIXON, M. D.,

Pennsylvania State Department of Health, Harrisburg, Committee.



Special Reports.



REPORT OF THE GENERAL INSPECTOR.

By C. W. WEBBERT.

During the first four months of 1911 the work of the General Inspector was confined to the office answering general correspondence, checking up vouchers and attending to special work in connection with the Session of the Legislature.

During the remaining eight months of the year twenty-three inspection trips were made, covering Allegheny, Beaver, Washington, Westmoreland, Jefferson, Indiana, Wyoming, Warren, Erie, Venango, Juniata, Berks, Montgomery and Bucks counties. Eleven county medical inspectors were visited and interviewed regarding conditions in their counties, fourteen health officers were called upon for the purpose of adjusting accounts and investigating complaints and special reports and recommendations were made concerning these men. Other Health Officers in the several counties were interviewed and instructions given where needed concerning their official duties.

Eight stream inspectors were interviewed in regard to their work on the water sheds, seven local boards of health and their officers were met and instructed regarding their duties and in several of the instances new organizations were perfected.

Twenty tuberculosis dispensaries located at Pittsburgh, Beaver Falls, Monongahela City, Washington, Greensburg, Punxsutawney, Dubois, Ridgway, Indiana, Tunkhannock, Warren, Erie, Oil City, Mifflin, Reading, Doylestown, Huntingdon, Clearfield, Phillipsburg and Pottstown were visited and inspected for the purpose of looking over the rooms or buildings and comparing the rents paid by the Department with prevailing rentals in the same locality.

Fourteen alleged violations of health laws were investigated and as a result of these investigations eight prosecutions were instituted all of which were successful. Three of these prosecutions were for failure on the part of the physician to report cases of contagious diseases, two of which were in Westmoreland county and one in Lancaster county. Five prosecutions were violations of quarantine all of which were in Wyoming county.

During the months of May and June, in accordance with that provision of the School Code, one thousand five hundred thirty-nine fourth class districts forwarded notices to this Department to the effect that they have passed resolution not to have medical inspection of schools. These notices were carefully filed and indexed and the seven hundred and eighty-one districts not sending such notices were placed on our list for inspection. Three hundred and twenty-one of these districts were boroughs and four hundred and sixty were townships. These

districts contained five thousand, nine hundred and twenty-five schools and about one hundred seventy-four thousand pupils. One hundred and twenty-eight third class districts (districts containing more than five thousand and less than thirty thousand inhabitants) also notified this Department that they had passed resolution not to have medical inspection. This left fifty-seven third class districts in which medical inspection should be furnished by the local school authorities.

During the summer months at the direction of the Commissioner of Health, a Model Health Ordinance for Boroughs and Townships was prepared in pamphlet form containing also copies of the several acts of Assembly relating to the organization of local boards of health. This pamphlet has been furnished to the local authorities throughout the State.

A digest of the Acts of Assembly relating to the Department of Health and local health authorities was re-edited and revised in order that Legislation of 1909 and 1911 might be inserted.

During the year about four hundred vouchers of health officers and other employees were examined with reference to particular charges contained in them, over two hundred of which were returned for correction of livery and time charges.

About one thousand five hundred letters were written to health officers, county medical inspectors, boards of health, school boards and others in addition to circular letters sent to Boards of School directors in the fourth class districts regarding the medical inspection of schools.

One hundred and thirty-four new health officers were appointed during the year, all of whom were instructed either personally or by correspondence as to the clerical duties pertaining to their office and were furnished with cards for notifying the physicians practicing in their districts of their appointment.

In making inspections in various parts of the State the General Inspector was absent from the office sixty-two days between the first of June, 1911 and January first 1912. He traveled six thousand, four hundred and forty-eight miles.

REPORT OF WILLIAM C. MILLER, SPECIAL MEDICAL INSPECTOR.

ORGANIZATION OF BOARDS OF HEALTH AND DELINQUENT REPORTS

The reports we file in this Sub-Division showed that on May 1, 1911, there were eighty-eight (88) boroughs and one (1) first class township, having an aggregate population of 79,449, having no Boards of Health.

At the same date it was shown that 123 boroughs, with an aggregate population of 189, 982, having Boards of Health, had not sent in reports of communicable diseases for the month previous. Letters dwelling upon the importance of promptness in sending in reports were sent to all delinquents. This method usually resulted in the receiving of reports from the boroughs addressed, but similar negligence on the part of other Boards rendered necessary the sending of frequent reminders. The following table indicates by months the number of boroughs having Boards of Health not reporting:

	Agg.	Pop.
April, 1911,	123	189,982
May,	103	.....
June,	88	87,998
July,	110	113,006
August,	101	113,459
September,	89	96,443
October,	85	93,015
November,	76	84,337
December,	80	93,705

Average number of boroughs not reporting, April, 1911, to December 31, 1911, 95.

The work of organization of Boards of Health in boroughs where no Boards existed, was accomplished both by correspondence and personal visitation on the part of the Special Medical Inspector.

Many of the boroughs were small and it was with difficulty that suitable persons, willing to serve as members of Boards of Health, could be secured. From May 15, 1911 until Dec. 31, 1911 the following Boards were organized.

Population. Borough and County.

1,724	McSherrystown, Adams County.
425	Osborne, Allegheny County.
230	Thornburg, Allegheny County.
1,895	Dravosburg, Allegheny County.
905	Glenfield, Allegheny County.
250	Hookstown, Beaver County.
1,163	Hyndman, Bedford County.
191	Pleasantville, Bedford County.
150	Alba, Bradford County.
142	Burlington, Bradford County.
326	Leraysville, Bradford County.
303	Chalfont, Bucks County.
1,388	Zelienople, Butler County.
539	Bruin, Butler County.
2,501	Weatherly, Carbon County.
638	Weissport, Carbon County.
11,767	West Chester, Chester County.
324	Wallacetown, Clearfield.
150	Blooming Valley, Crawford County.
695	Cochrantown, Crawford county.
135	Hartstown, Crawford County.
264	Newburg, Cumberland County.
322	Millbourne, Delaware County.
545	Dauphin, Dauphin County.
138	Elgin, Erie County.
357	Jefferson, Greene County.

Population. Borough and County.

196	Birmingham, Huntingdon County.
211	Marklesburg, Huntingdon County.
230	Shirleysburg, Huntingdon County.
1,032	Big Run, Jefferson County.
2,082	Lititz, Lancaster County.
603	Jonestown, Lebanon County.
372	Green Lane, Montgomery County.
210	Lewis Run, McKean County.
7,460	Milton, Northumberland County.
579	Lewisville, Potter County.
491	Port Clinton, Schuylkill County.
1,336	Berlin, Somerset County.
184	Eaglesmere, Sullivan County.
495	West End, Venango County.
335	Clintonville, Venango County.
2,036	West Brownsville, Washington County.
1,302	Cokeburg, Washington County.
644	Finleyville, Washington County.
1,039	Manor, Westmoreland County.
717	New Florence, Westmoreland County.
308	Wellsville, York County.

Total boroughs, 47.

Total population, 49,007.

Boards Organized in First-Class Townships, during Year 1911.

Elizabeth Township, Allegheny County.
 Hanover Township, Luzerne County.
 Aston Township, Delaware County.

On December 31, 1911, the following counties were completely organized.

County.	Number of Boroughs.	Number First Class Townships.
Blair,	10	0
Bucks,	20	0
Cambria,	29	0
Cameron,	2	0
Carbon,	10	0
Center,	10	0
Chester,	14	0
Clinton,	7	0
Columbia,	8	0
Cumberland,	11	0
Dauphin,	15	1
Delaware,	20	7
Elk,	3	0
Forest,	1	0
Franklin,	4	0
Fulton,	1	0
Greene,	8	0
Jefferson,	11	0
Lancaster,	17	0
Lebanon,	2	2
Lehigh,	9	1
Lycoming,	9	0
McKean,	5	0
Mercer,	16	0
Monroe,	3	0
Montour,	2	0
Northampton,	20	0
Northumberland,	12	1

Philadelphia, .....	..	0
Pike,	2	0
Potter,	6	0
Snyder,	2	0
Tioga,	13	0
Union,	4	0
Venango,	8	0
Wayne,	6	0
Wyoming,	5	0

Number of counties in which Boards of Health have been organized completely, 37

On Dec. 31, 1911 the following counties were incompletely organized:

Population.	Borough (No Board) & Co.	No. of Boro.
1,118	Littlestown, Adams County,	11
859	Ben Avon, Allegheny County,	41
453	Manorville, Armstrong County,	18
183	South Bethlehem, Armstrong County, .....	..
128	Frankfort Springs, Beaver County,	25
172	Glasgow, Beaver County, .....	..
205	New Paris, Bedford County,	13
102	St. Clairsville, Bedford County, .....	..
226	Woodbury, Bedford County, .....	..
348	Coaldale, Bedford County, .....	..
381	Beechtelsville, Berks County,	6
141	Centerport, Berks County, .....	..
203	Sylvania, Bradford County,	14
525	Wyalusing, Bradford County, .....	..
235	Fairview, Butler County,	22
265	Karns City, Butler County, .....	..
950	Millerstown, Butler County, .....	..
113	Cherry Valley, Butler County, .....	..
313	Shippensburg, Clarion County,	12
647	Burnside, Clearfield County,	20
220	Glen Hope, Clearfield County, .....	..
314	Newburg, Clearfield County, .....	..
289	Wallaceton, Clearfield County, .....	..
260	Centerville, Crawford County,	10
343	Conneaut Lake, Crawford County, .....	..
337	Hydetown, Crawford County, .....	..
327	Townville, Crawford County, .....	..
233	Venango, Crawford County, .....	..
109	Woodcock, Crawford County, .....	..
767	Waterford, Erie County,	13
324	Springfield, Erie County, .....	..
1,219	Fairchance, Fayette County,	16
168	Cassville, Huntingdon County,	18
182	Coalmont, Huntingdon County, .....	..
196	Three Springs, Huntingdon County, .....	..
273	Thompsontown, Juniata County,	4
307	Glenburn, Lackawanna County,	20
93	Gouldsboro, Lackawanna County, .....	..
395	Enon Valley, Lawrence County,	7
433	Yates, Luzerne County,	35
202	New Columbus, Luzerne County, .....	..
520	McVeytown, Mifflin County,	3
528	Hatfield, Montgomery County,	23
171	New Buffalo, Perry County,	9
3,666	Girardville, Schuylkill County,	29
249	Benson, Somerset County,	20
999	Paint, Somerset County, .....	..
178	Somerfield, Somerset County, .....	..
442	Laporte, Sullivan County,	4

Population	Boroughs (No. Board) County.	No. of Boro.
326	Hopbottom, Susquehanna County,	14
213	Little Meadows, Susquehanna County, .....	..
388	Grand Valley, Warren County,	8
338	Beallsville, Washington County,	31
273	Long Branch, Washington County, .....	..
136	Twilight, Washington County, .....	..
241	W. Middleton, Washington County, .....	..
382	Arona, Westmoreland County,	41
403	North Irwin, Westmoreland County, .....	..
147	Donegal, Westmoreland County, .....	..
312	Hyde Park, Westmoreland County, .....	..
175	Livermore, Westmoreland County, .....	..
464	Madison, Westmoreland County, .....	..
771	Youngstown, Westmoreland County, .....	..
250	Franklintown, York County,	33
202	Fawn Grove, York County, .....	..
529	Hellam, York County, .....	..
343	Loganville, York County, .....	..
241	York New Salem, York County, .....	..
357	Jefferson, York County, .....	..
Total number of counties not completely organized,		29

A copy of the Annual Report required by the Department of Health from borough Boards of Health is attached hereto.

Seven hundred and fifty-six (756) boroughs and first class townships sent Annual Reports to the Department of Health.

These reports indicate a laxity, particularly on the part of smaller municipalities, in enforcing the regulations of the Department of Health.

101 boroughs reported 411 privies overhanging streams.

203 boroughs report 831 private sewers emptying into public streams or their tributaries.

204 boroughs report public sewers discharging into public streams.

95 Boroughs dispose of their sewage by cesspools, and 435 have no system of sewage disposal.

In the public schools 590 sanitary fountains are reported. 614 schools require individual drinking cups and 1,474 report the use of the Public Drinking Cup.

47,209 nuisances, the bulk of them from municipalities of over 5,000 inhabitants, were reported. Of these 42,987 were abated.

All Boards of Health report the observing of quarantine restrictions and the disinfection of premises where communicable disease, as listed on table, exists.

199 boroughs and first-class townships report the enforcement of the Act of 1909, forbidding spitting in public places. In many instances, particularly in the smaller boroughs, the appropriation made by the Town Council is inadequate, and in consequence, the work of Health Boards is restricted.

(1) Do you supply physicians with proper blanks for reporting communicable disease?

COMMUNICABLE DISEASES. Name of Diseases.	Number of cases.	Number of deaths.	Number of outbreaks.	Number of infected houses.	Number of outbreaks confined in first house.	Schools closed.	No. attending physician. Number cases.
Actinomycosis,
Anterior Poliomyelitis,
Anthrax,
Bubonic Plague,
Cerebrospinal Meningitis,
Chickenpox,
Cholera,
Diphtheria,
Epidemic Dysentery,
Erysipelas,
German Measles,
Glanders,
Leprosy,
Malarial Fever,
Measles,
Mumps,
Pellagra,
Pneumonia (True),
Puerperal Fever,
Rabies,
Relapsing Fever,
Scarlet Fever,
Smallpox,
Tetanus,
Trachoma,
Trichiniasis,
Tuberculosis,
Typhoid Fever,
Typhus Fever,
Uncinariasis,
Whooping Cough,
Yellow Fever,

What method of disinfection is used?.....
Do you employ in disinfection; the number of hours required by the regulations of
the Department of Health?
Do you fully observe quarantine restrictions and the disinfection of premises where
all communicable disease, as listed on table exist?.....
Do you enforce the Law of 1909 forbidding spitting in public places?.....

EPIDEMICS.			
Disease.	Month.	Number cases.	Number deaths.
.....
.....
.....
.....

PUBLIC SCHOOLS.
State number of schools in your jurisdiction
State system of heating
Source of supply of drinking water
State system of disposal of sewage,
What system of drinking cup or fountain is used by the children.....

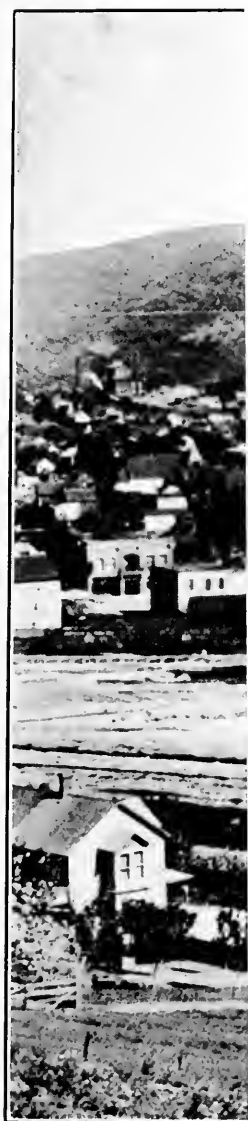
STATE SOURCE OF PUBLIC WATER SUPPLY
State methods of Disposal of public sewage
Any private sewers empty into public streams or tributaries?
How many?
Any privies overhanging streams?.....How many?.....
Do you attempt to regulate the discharge of sewage from private sewers into the
waters of the State irrespective of their being local nuisances?
Number of nuisances reported.....Number of nuisances abated.....
Describe any special sanitary work that has been done by your Board.....
.....
.....
.....
.....

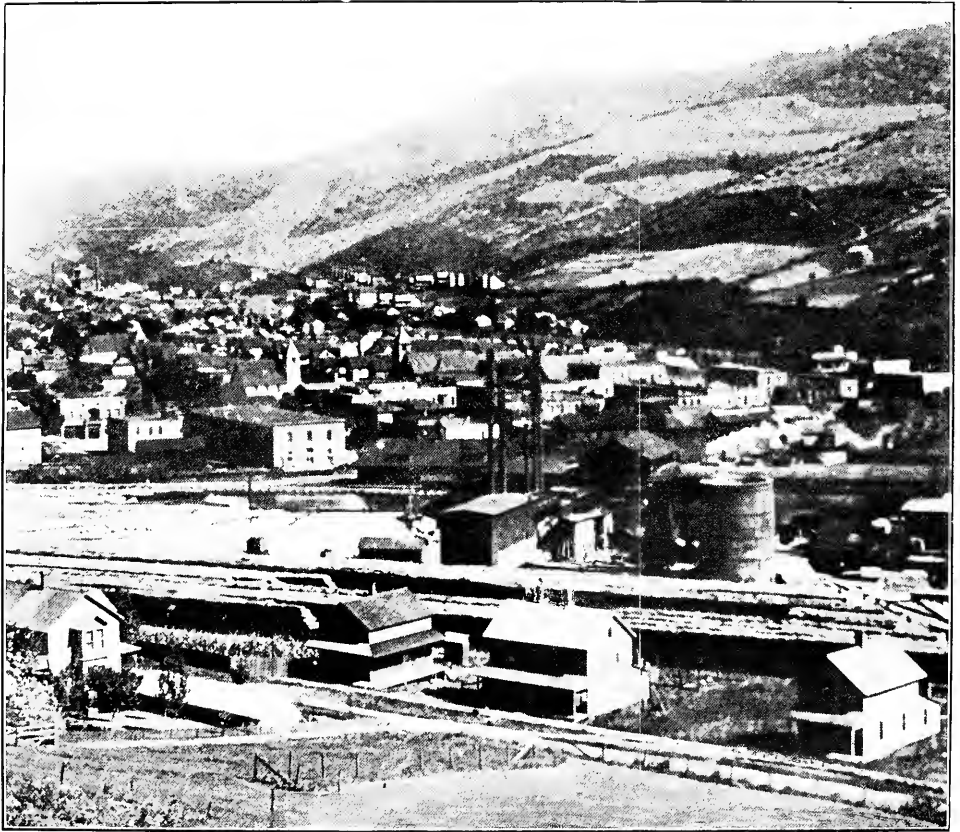
What annual appropriation is made by the Council or (in case of first class town-
ships) the Board of Commissioners, to the Board of Health?
Have you received a copy of the Model Health Ordinance, together with model forms
for the use of Boards of Health?
If so, have you adopted such rules and regulations?
Have they been adopted as ordinances by your Council-or (in case of first class town-
ships) your Board of Commissioners?
Give name of,
Pres. of CouncilSecy. of Board of Twp. Com
Secy. of CouncilSalary of Secretary
Pres. of Board of Twp. com.Salary of Health Officer,
Date and place of regular meetings,
(Signed)

Date
..... County

Names of Members of Board:
President
.....
.....
.....
.....
.....
.....
.....
City
Borough
1st class Twp.
Term expires:

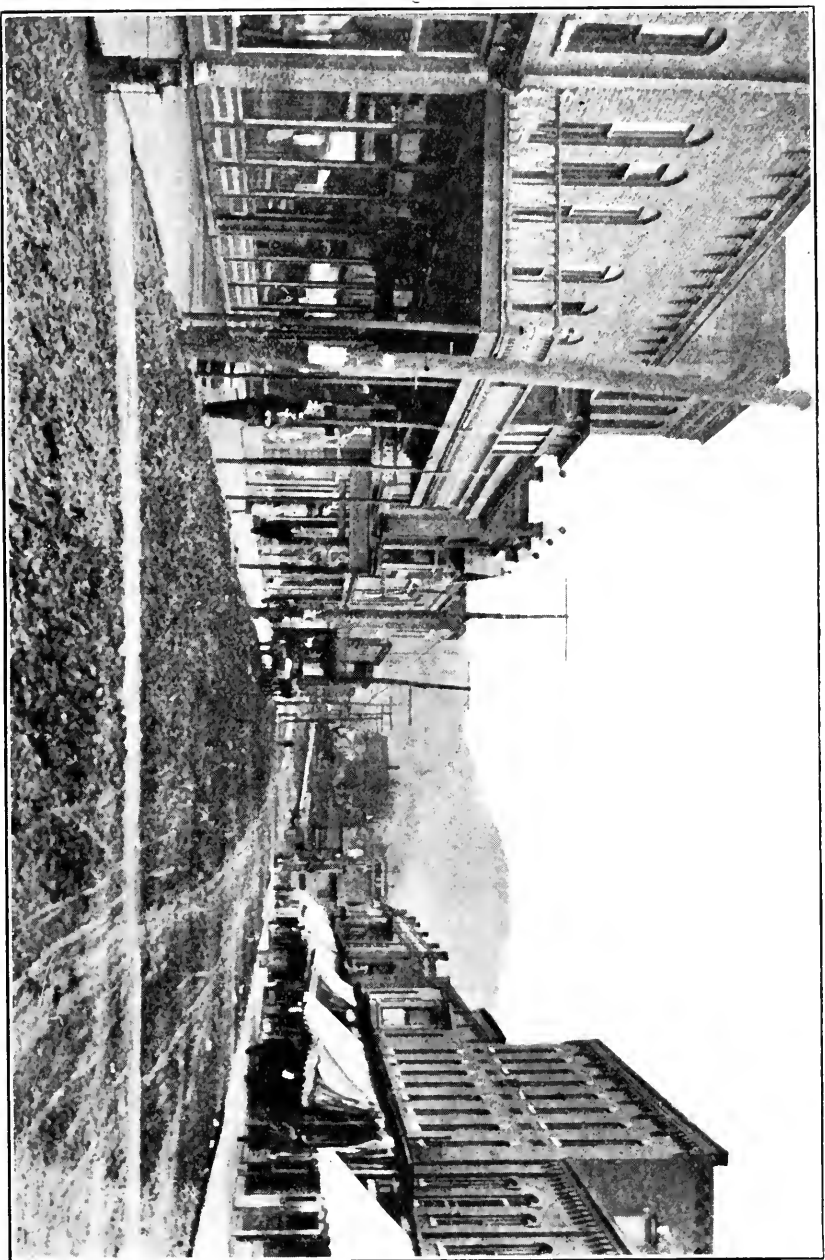
.....Pa. 1-1-191....
Secretary
Health Officer
Street Address
Street Address





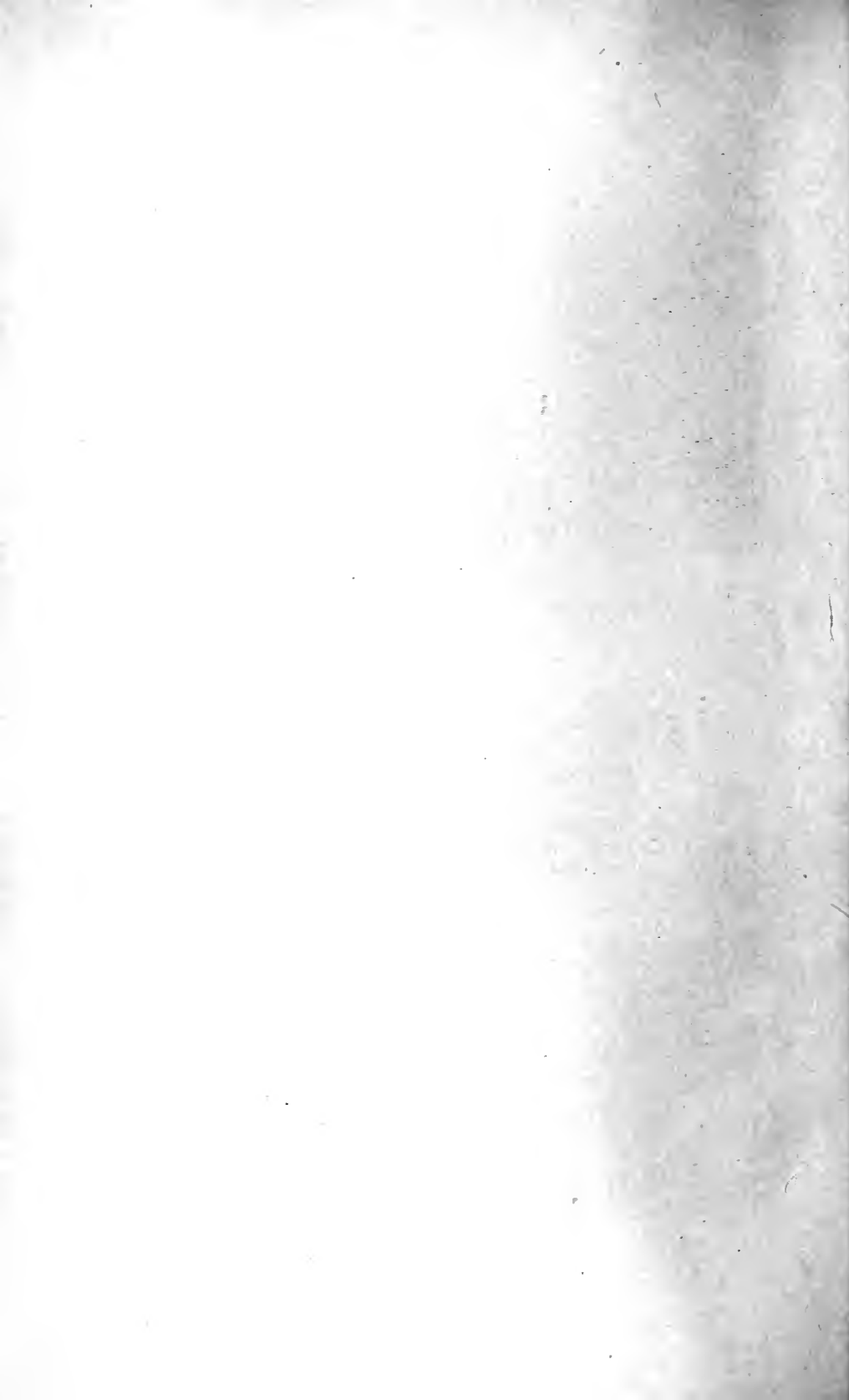
Austin Before the Dam Broke.

By the courtesy of the Hon. Frank E. Baldwin.



Main Street, Austin, April, 1911.

By the courtesy of S. W. Jackson.



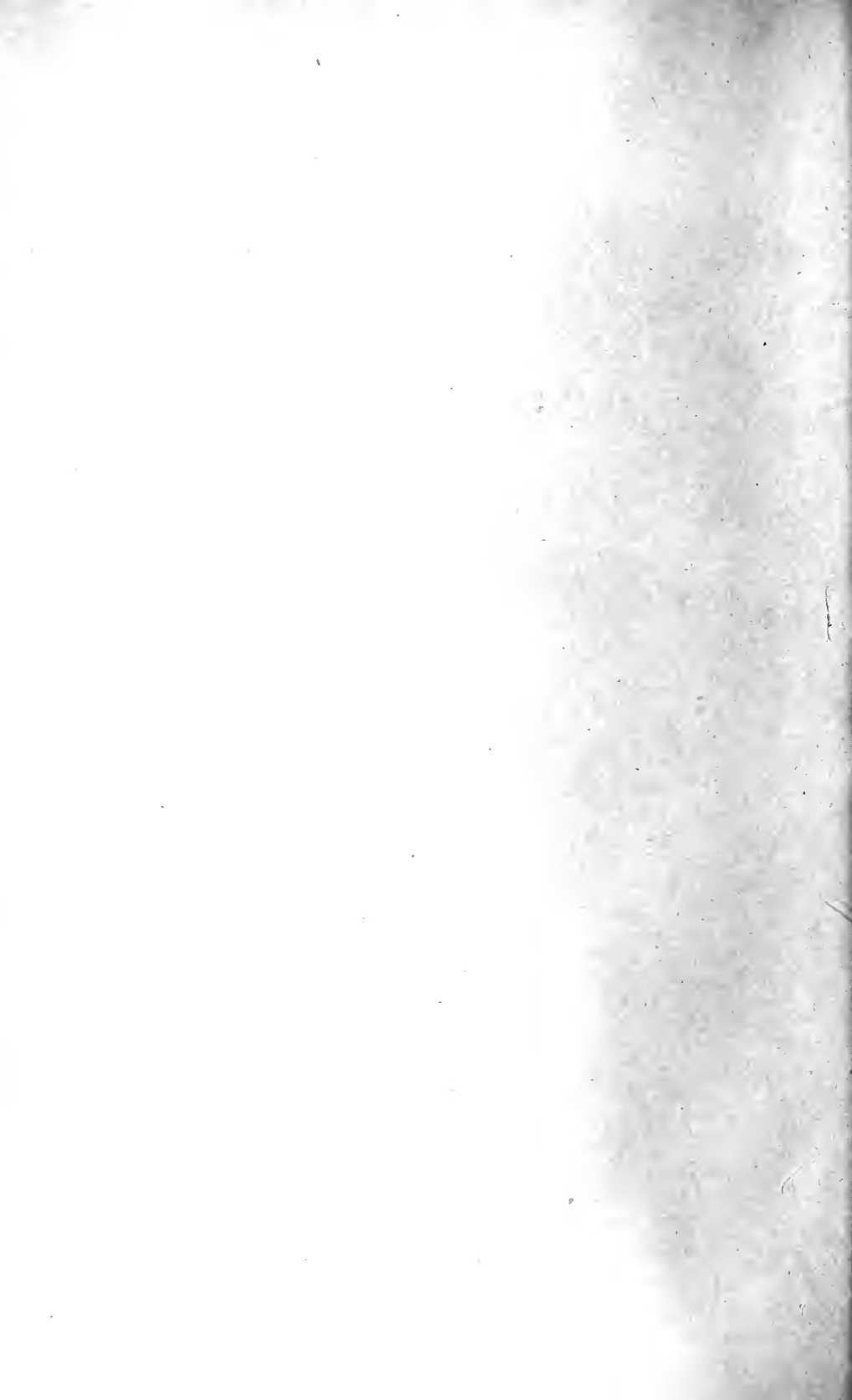


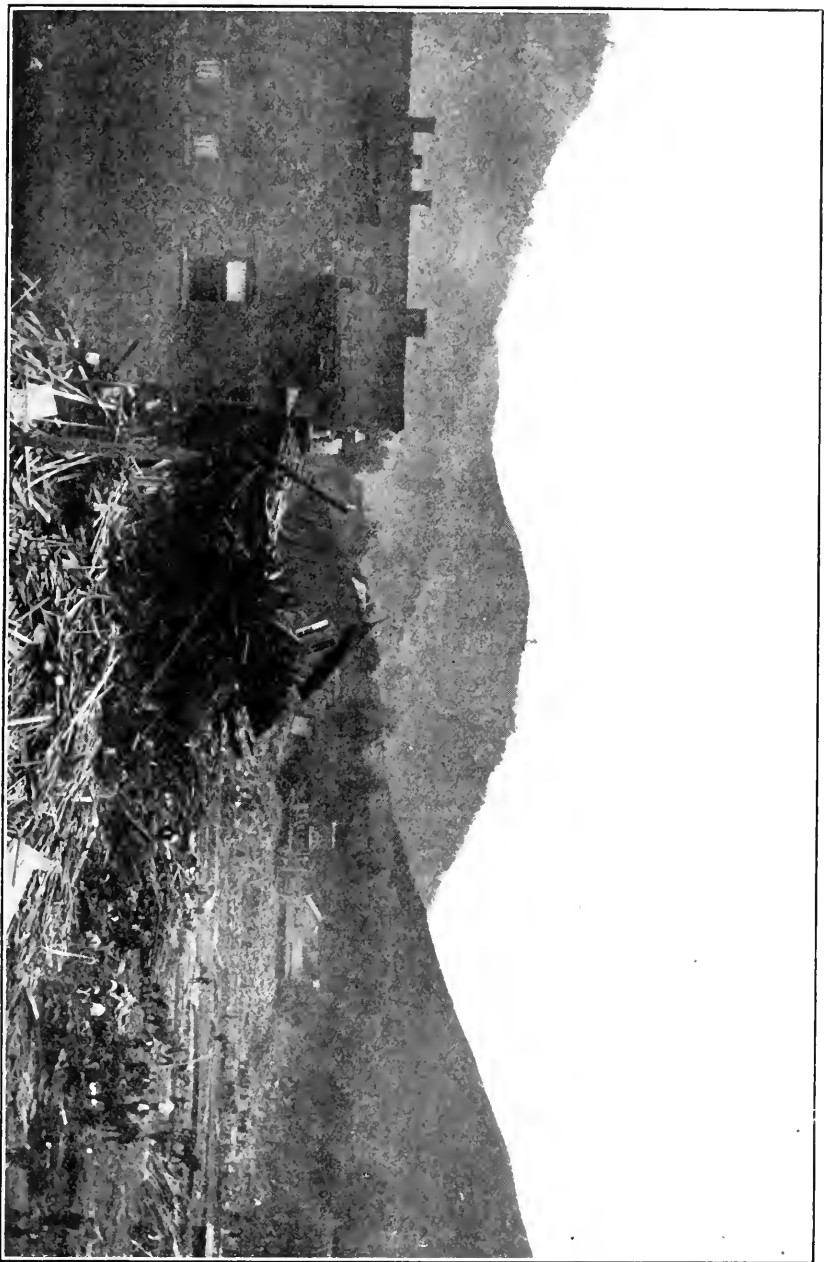
Turner Street, Austin—On the Flats Above Main Street.



The Dam at Austin.

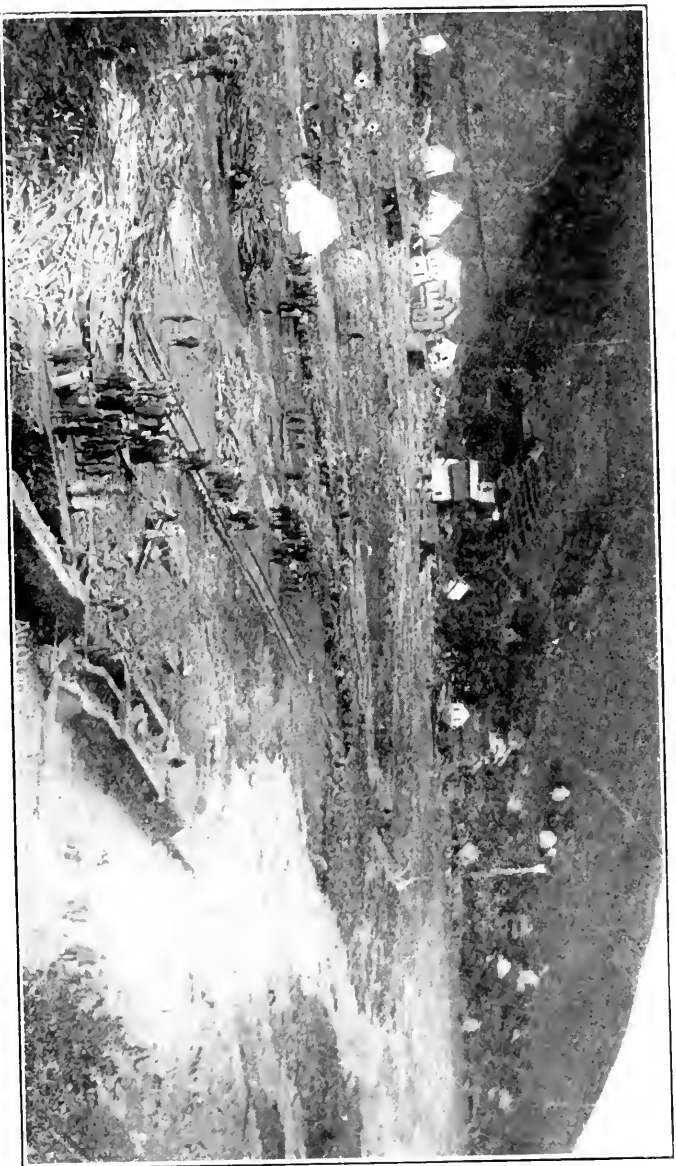
By the Courtesy of J. H. Hare.





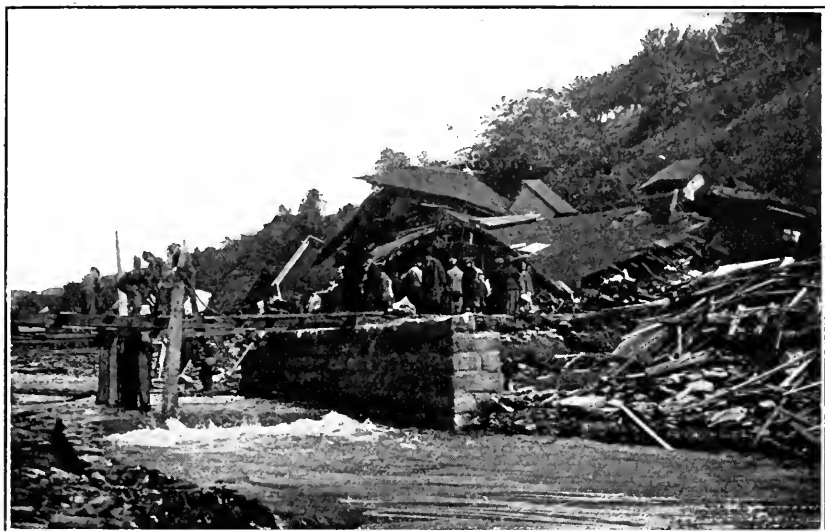
Main Street, Austin, October 2, 1911

By the courtesy of S. W. Jackson.



The Flats Above Main Street. The Picture Shows Where the Bridge Over Freeman's Run Had Stood, at the End of Main Street. The Tent is the First Aid Station.

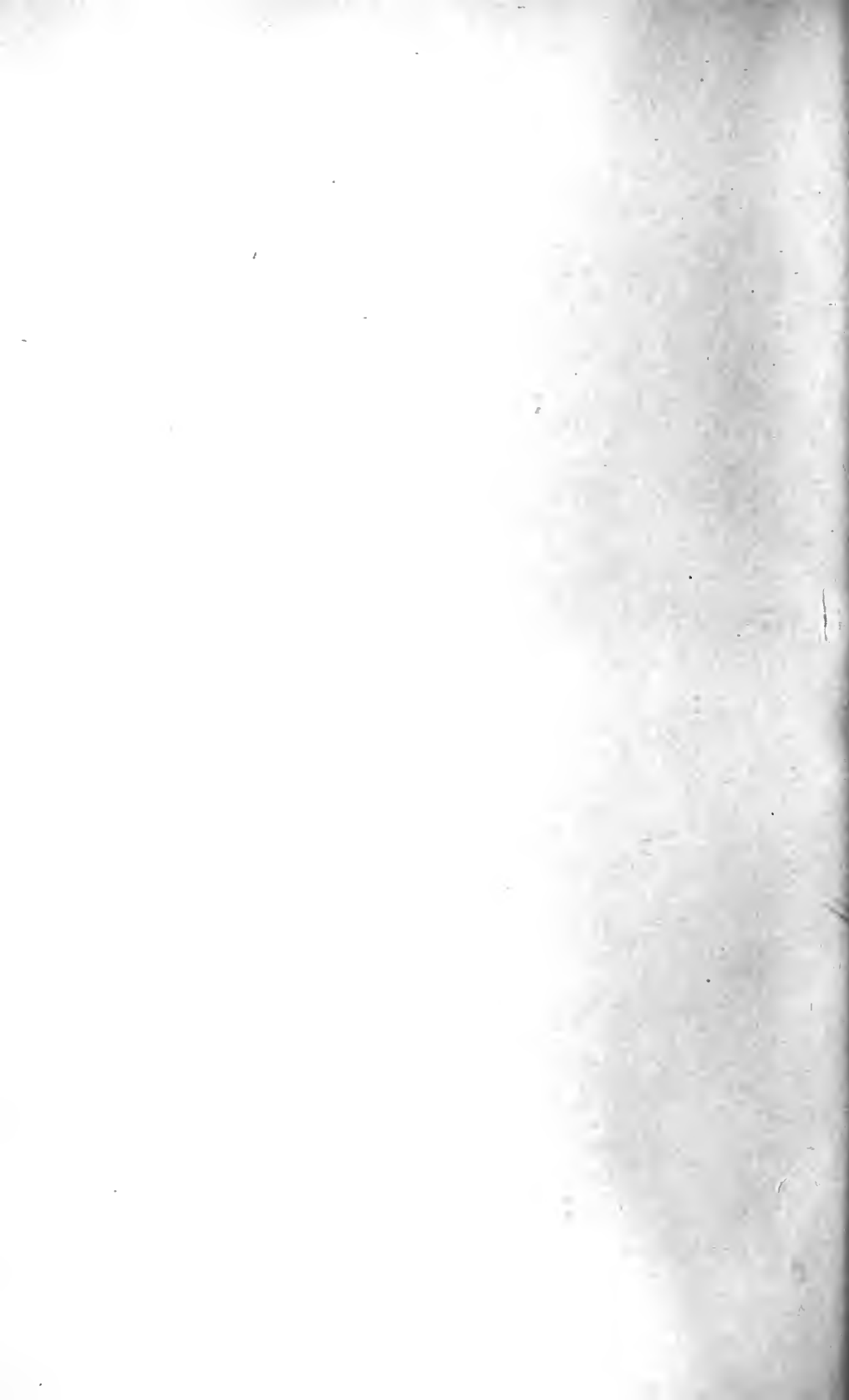


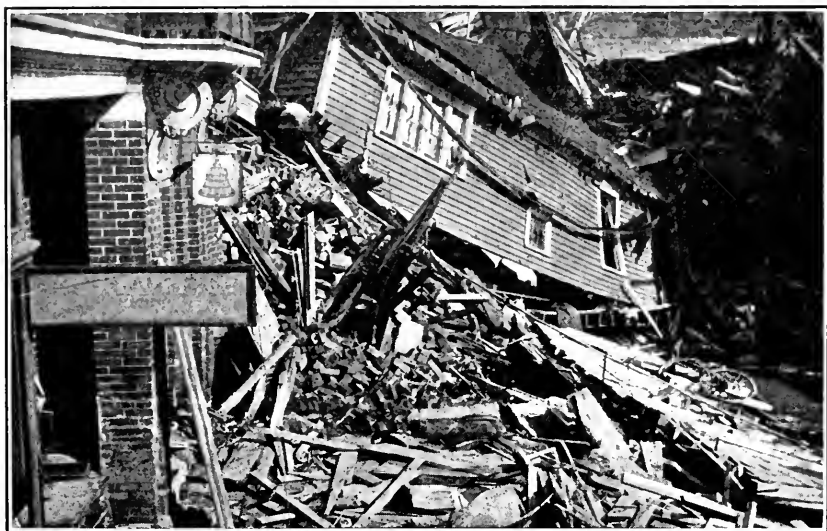


Building a Temporary Bridge Over Freeman's Run.

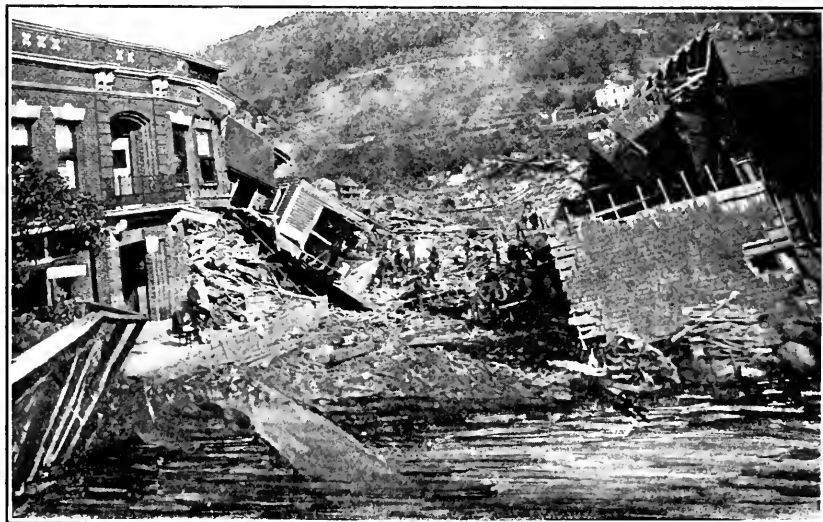


The Temporary Bridge.

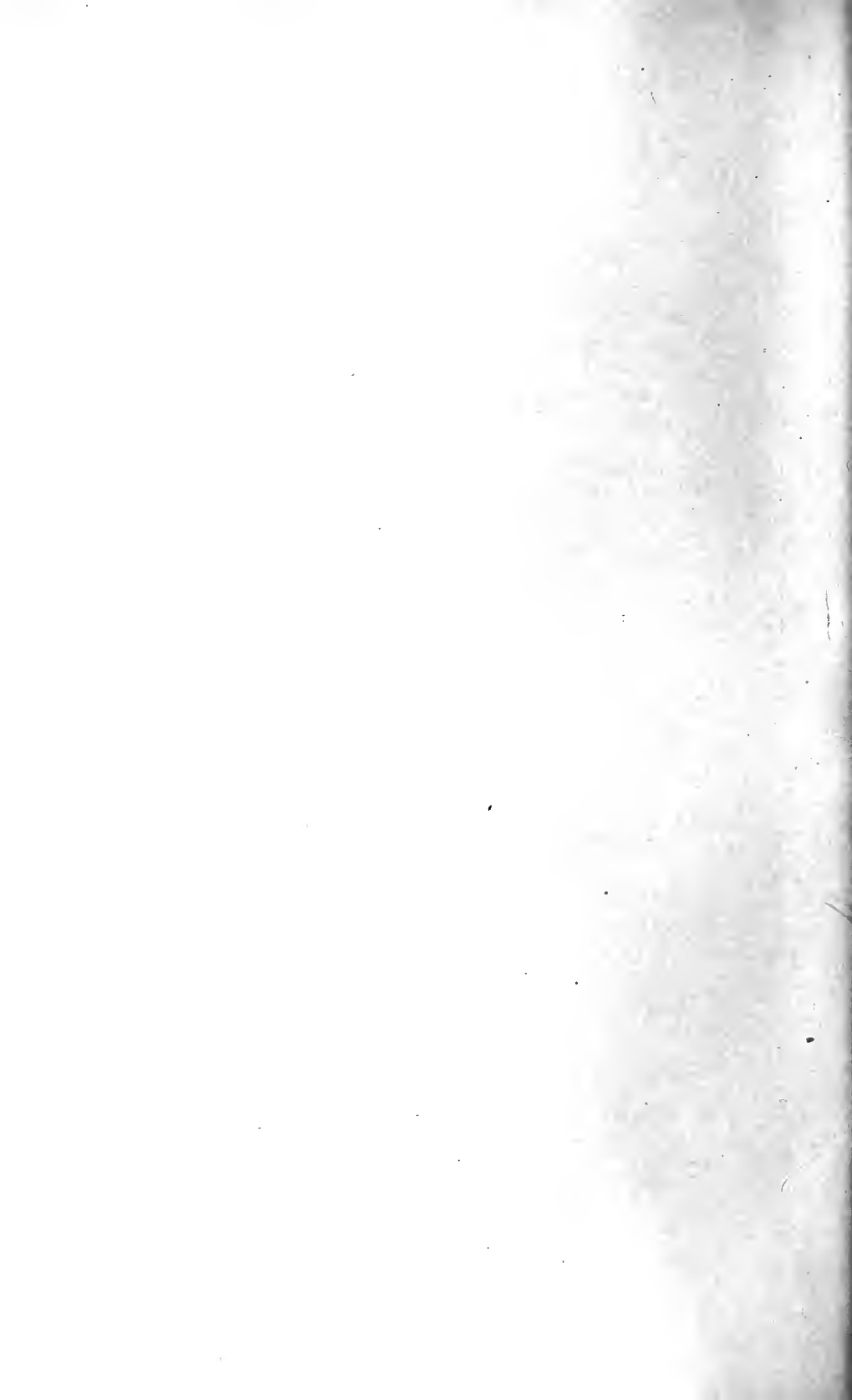


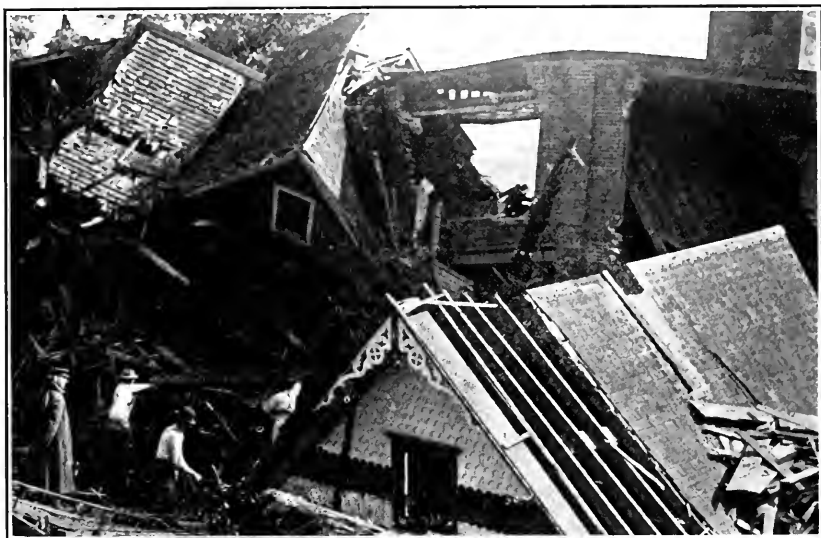


Wreckage Near the Post Office and the Telephone Exchange.



The Same Street Partly Cleared.



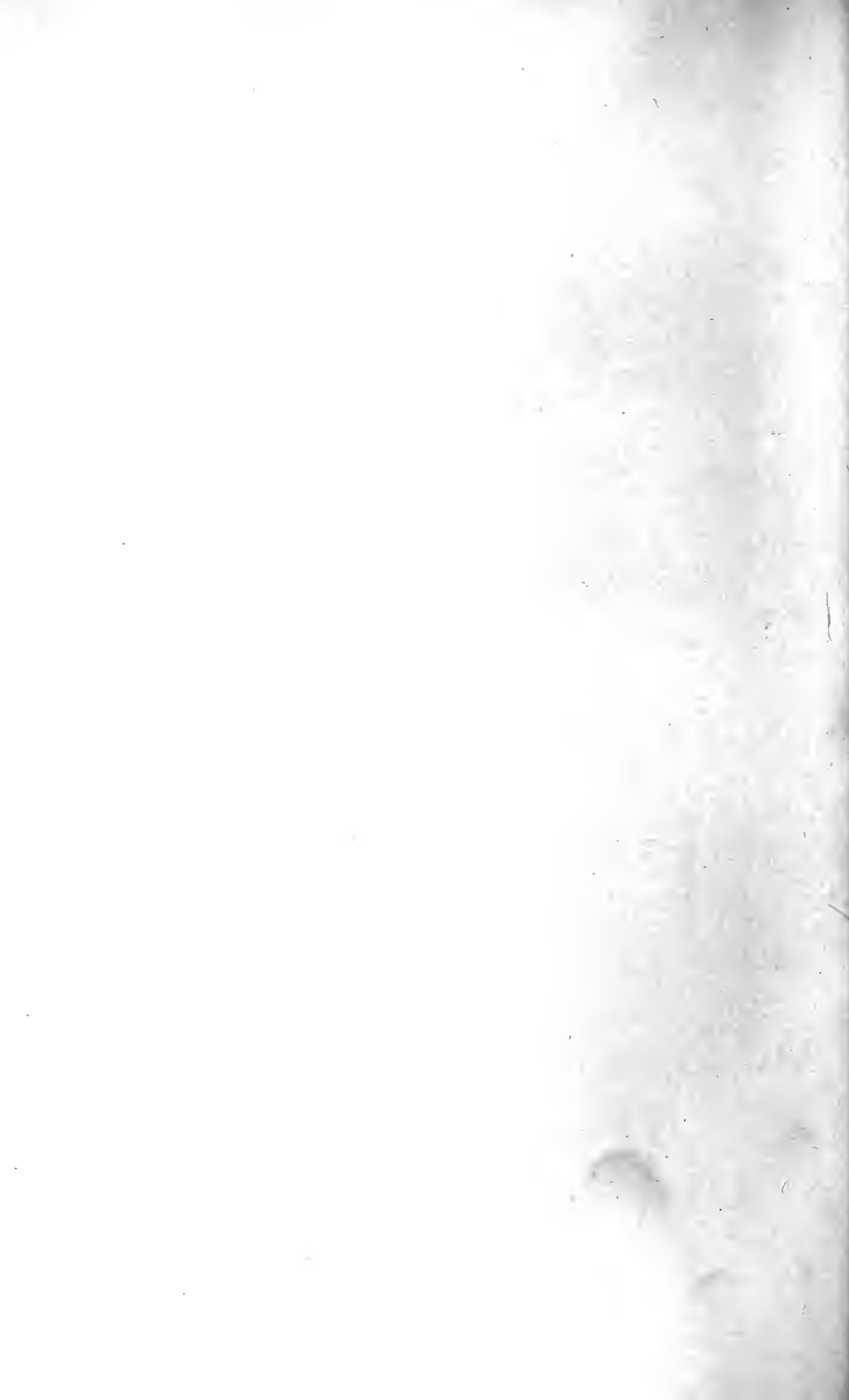


The City Hall of Austin.



Sample of Wreckage on the Corner of Main Street.

Copyright of Underwood and Underwood.

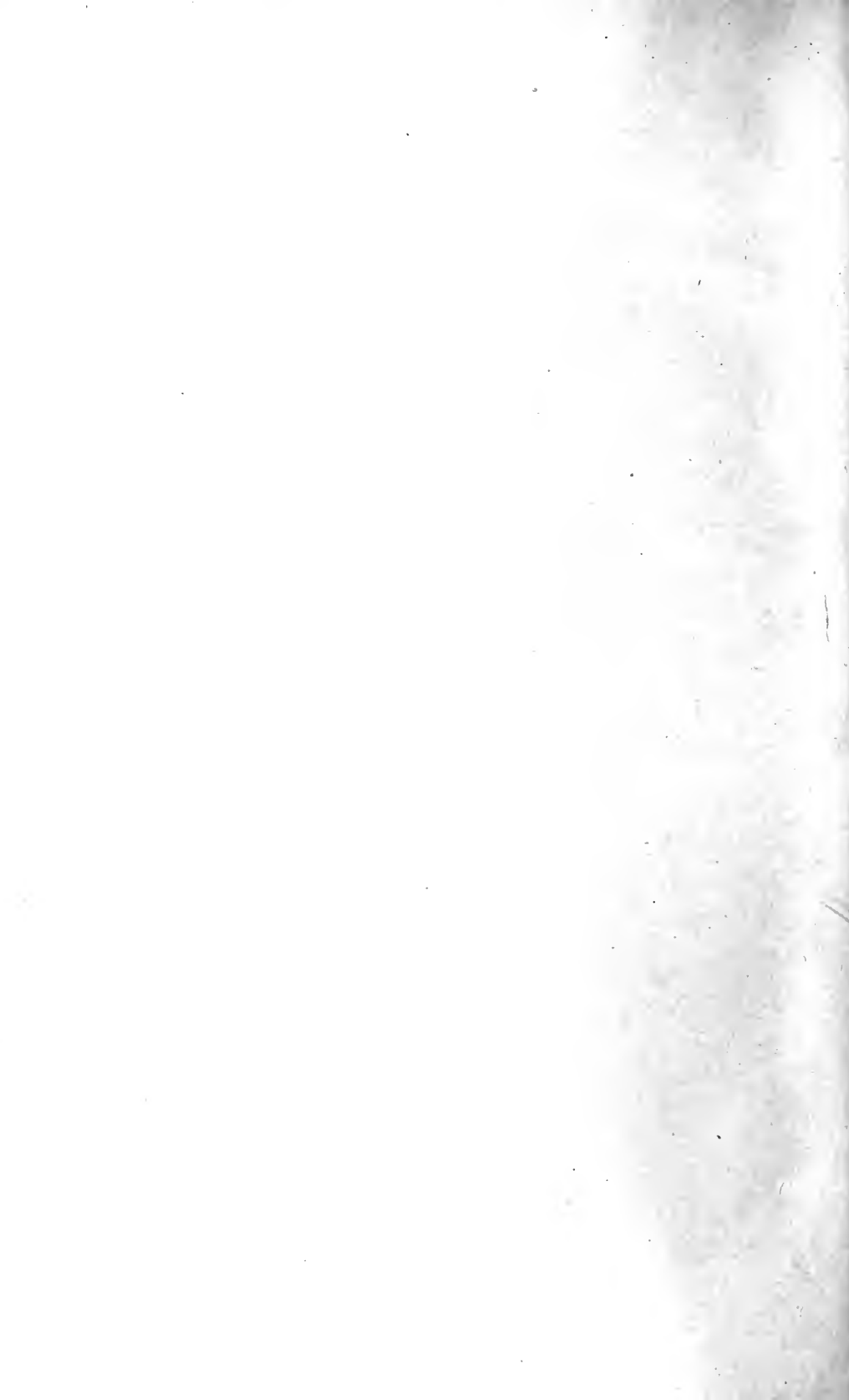




Railroad Bridge Above Costello.



Railroad Bridge at Costello.



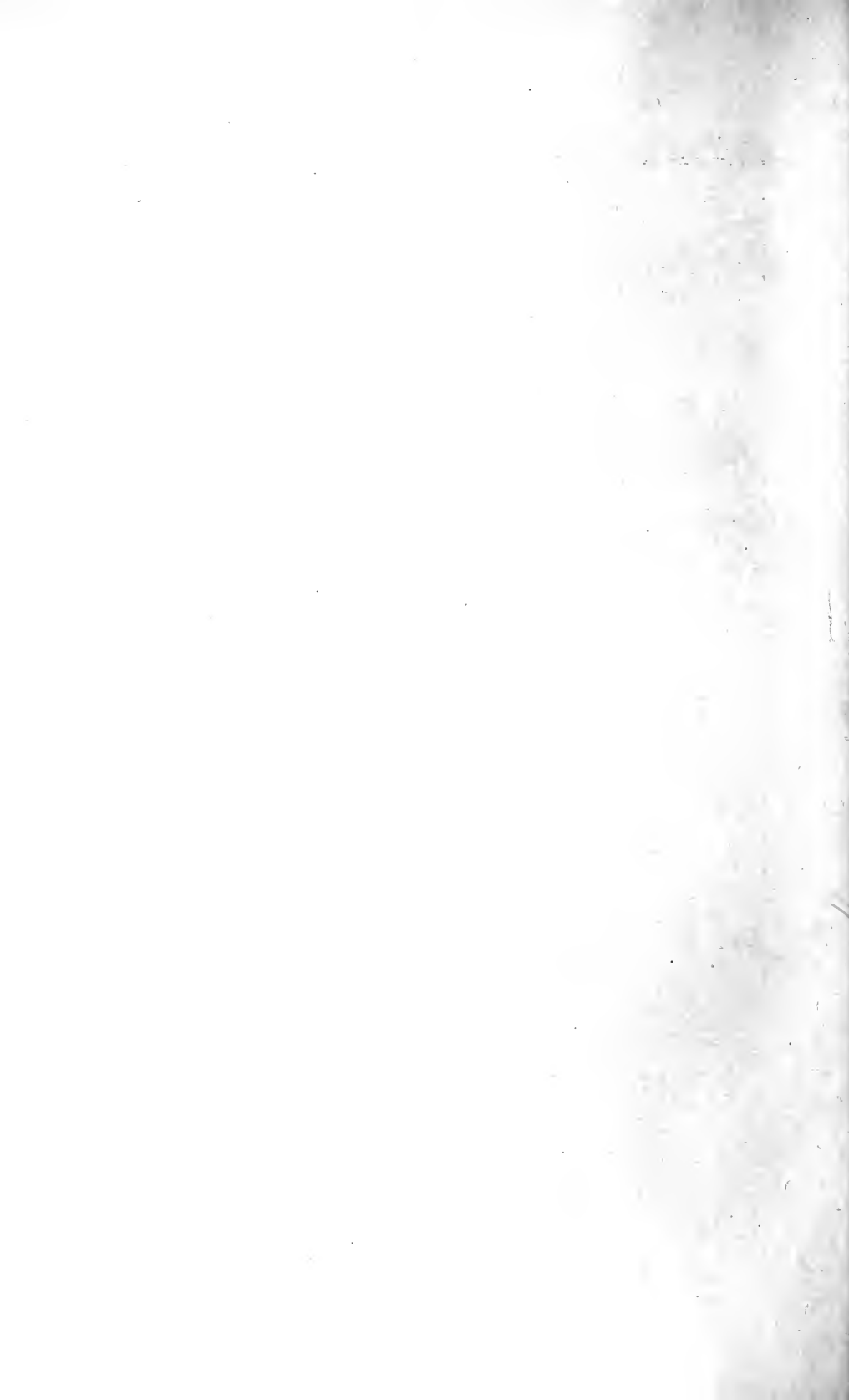


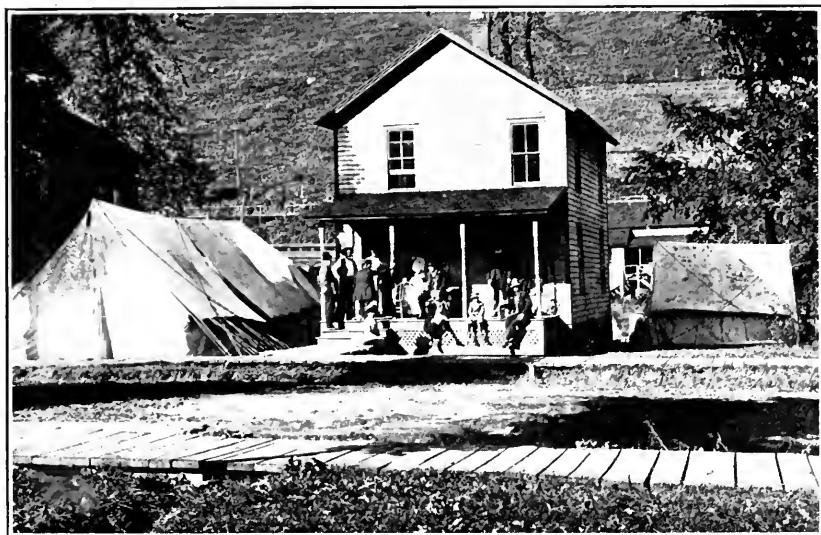
Wrecked Buildings on the East Bank of Freeman's Run.

Copyright of Underwood and Underwood.



Wreckage Near One of the Lumber Mills.



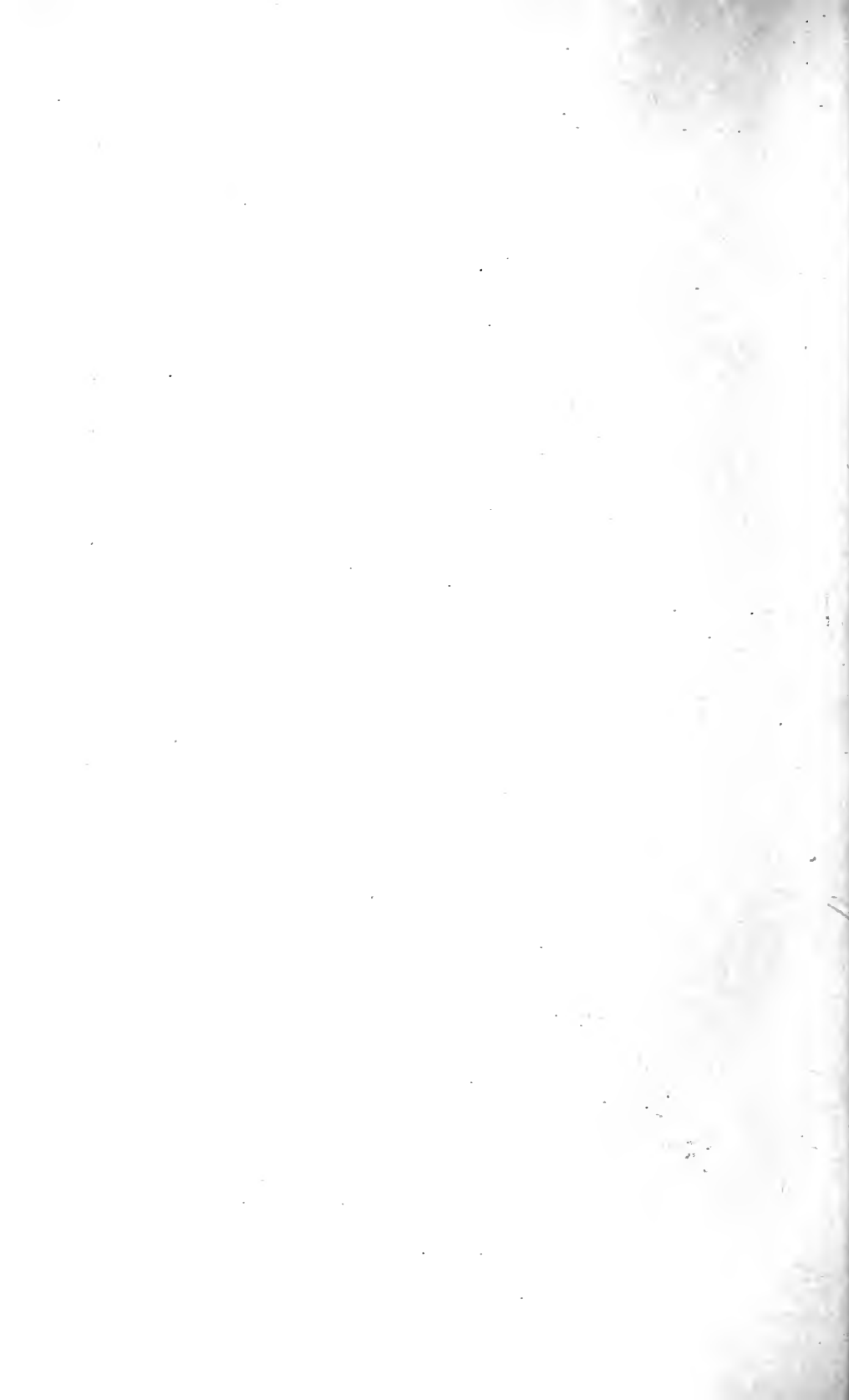


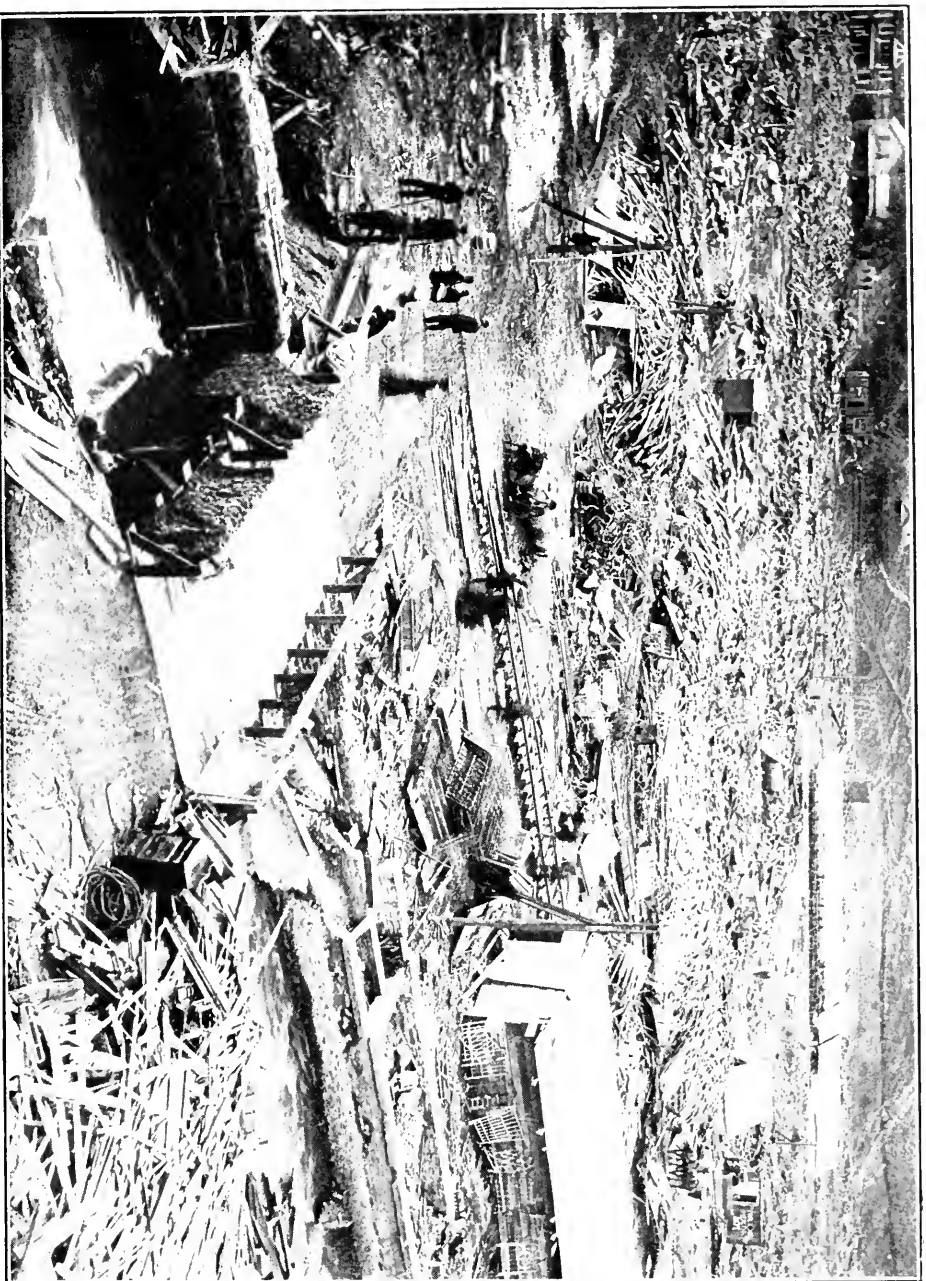
The Morgue.



Bringing in a Body.

Copyright of Underwood and Underwood.





Austin About October 12, 1911. The Picture Shows the Mess Tent and the First Aid Station, and the Disposit of the Wreckage Which Had Been Overhauled in the Search for Bodies.



SPECIAL REPORT OF THE COMMISSIONER OF HEALTH
CONCERNING THE EMERGENCY WORK UNDERTAKEN
BY THE STATE DEPARTMENT OF HEALTH AFTER THE
BREAKING OF THE DAM AT AUSTIN, SEPTEMBER 30, 1911.

The General Assembly when establishing the Department of Health, defined one of the duties of the Commissioner of Health to be the protection of the health of the people of the State. The scope of this protection was made clearer by an appropriation to create an emergency fund to be used *inter alia* when "the public health is threatened—as a result of great disaster—to such an extent that the local authorities are unable to meet the emergency."

This year the Department of Health has had an excellent opportunity to demonstrate the wisdom of the legislative measures by which it is empowered to help a community overwhelmed by disaster. This opportunity came at the end of September when at Austin, in Potter County, a large dam, long feared as dangerous, suddenly gave way and "went out." This took place in the middle of the afternoon of a beautiful day, Saturday, September 30th, but after a period of heavy rains. The break is said to have occurred shortly—15 to 20 minutes—after two o'clock, but so extensively were the wires demolished that the news of the disaster was but slowly spread abroad.

My first information came over the telephone about six o'clock just as I arrived at my home at Black Rock Farm, Bryn Mawr, on my return from the branch office in Philadelphia. The message was from Congressman M. E. Olmsted and told me that the dam had given way discharging some two hundred million gallons of water upon the borough of Austin resulting in the destruction of the entire municipality, which had a population of about three thousand persons, and carrying devastation for miles beyond, taking in on its wild dash down the valley the village of Costello. Mr. Olmsted suggested medical assistance and sanitary protection. Immediately following came a call from the Harrisburg office informing me of the situation.

Recalling the fact that the Act of Assembly had made the Department the guardian of the public health in this great Commonwealth and that the Legislature in its wisdom had made the appropriation to the Department broad enough to meet almost any emergency in which the health and lives of the people were involved, I felt that there could be no question as to the Commissioner's responsibility.

It was, however, an unfortunate time. It was not only Saturday, but it was also the day of the primary elections and many of our men in order to vote were absent at their homes, scattered in various parts of the Commonwealth. In spite of this I at once set to work to summon doctors and nurses, and a suitable corps of engineers to the scene of distress. At the same time I called up our County Medical Inspectors stationed in counties not too remote from the stricken valley that they might render aid as speedily as possible.

Notwithstanding the promptness of this action on my part, as I afterwards learned, some of our officers, living near Austin and mindful of their departmental obligations, were already at work. One of our County Inspectors made a quick trip of fifteen miles in his automobile from Coudersport and by a hard climb of nearly a mile over wreckage and up the hillside through mud and water reached the Austin General Hospital within forty-five minutes after hearing of the catastrophe. Another of our County Inspectors came in soon from Cameron County, both being on duty a couple of hours after the breaking of the dam. Early in the evening two more of our men, Health Officers in McKean County, also came in.

The main office of the Department of Health at Harrisburg is always open, day and night, the year round. By ten o'clock that night the Chief Engineer and the Chief of the Tuberculosis Dispensaries had gathered in engineers, doctors, and nurses from Harrisburg and the surrounding country as far away as Carlisle, and all were in readiness to start. Mr. William B. McCaleb, Superintendent of the Philadelphia Division of the Pennsylvania Railroad Company, had provided a special coach and had also arranged for other reservations on the train to Keating Summit leaving Harrisburg just before eleven o'clock. From the Summit a special train on the Buffalo & Susquehanna Railroad was to carry them some eight or nine miles over the hills and down to Austin.

Other physicians and nurses were directed to meet the train as it passed up through the State, and join the party.

When this advance guard came into Austin the next morning it contained thirteen doctors, five engineers, and twelve nurses. This force was later enlarged and varied as changing conditions required.

The Chief Medical Inspector, who had reported his presence in Philadelphia, was instructed to proceed to the ruined valley. The head nurse was called from a vacation in Baltimore and went on to Austin late in the evening.

In every way it was a busy night. The night superintendent at the Harrisburg office had succeeded in getting the merchants out of their homes to their places of business, so that mattresses, blankets, etc., might be purchased and sent on for the relief of the sufferers without delay.

The Purchasing Agent in Philadelphia was instructed to order foodstuffs from Buffalo and other nearby places. Adjutant General Thomas J. Stewart in the course of the night shipped tents, cooking utensils, some foodstuffs, and overcoats from the Harrisburg Arsenal in care of Major Maurice Finney of the National Guard of Pennsylvania.

By the direction of the Governor, Major John C. Groome, Superintendent of the State Police, had ordered one troop of his force to entrain under command of Lieutenant William E. Mair, and go at once to Austin and take up such patrol work as the general ruin might call for. Other troops were to follow.

I remained at my home telephone until engineers, doctors, nurses, provisions and clothing were on the way to the devastated borough. Early Sunday morning I took a train to Harrisburg, where I received word that all was well and that I could, with safety, break away from communication and continue on the same train to Keating Summit where a train would be in waiting for passengers and supplies to carry them to Austin. We arrived early Sunday evening in a downpour of rain. Over the scene of destruction with its mud and debris there was a red glow from the flames of a burning kindling wood factory that had caught fire from the natural gas escaping from a broken pipe.

The buildings, with their foundations, trees, bridges and pavements, had been torn to pieces and swept away by the incalculable force of the waters loaded with 150,000 cords of hemlock logs, which were stored just below the dam. Each log must have acted as a battering ram, making up in all millions, one following another in quick succession. This mass carried and ground everything that happened to be in its terrible path. Not only did this mass of logs add immensely to the destructive impact of the water, but the logs also did great harm by lodging against buildings and wreckage so as to form a sort of dam, or even a series of dams, in the town itself. The most harmful dam of this type formed at the rear of buildings on the upper side of Main street. In this way also the run-off of the water was hindered and much further damage rendered possible.

The topography of the town was an important factor in making its destruction easy and complete. Austin lies about fifteen miles southwest of Coudersport in the narrow valley of Freeman Run and a little above the entrance of a smaller stream, called West Freeman Run, which comes down southeasterly from the neighborhood of Keating Summit. The valley has no great width, perhaps some forty rods in the widest place. It grows narrower above forming a long slender triangle the apex a mile or more up stream and some two hundred yards above a large pulp mill of the Bayless Pulp and

Paper Company to which the broken dam also belonged. Near the base of this triangle and somewhat above West Freeman Run, Main street, about forty rods long, being the chief street of Austin, ran across the valley. This street was well filled on both sides with buildings of two or three stories, largely of brick construction. Above Main street lay the principal residential district, a large flat territory well covered with houses, for the most part wooden buildings and of no great size. On each side of the valley the ground rose at once abruptly to form steep hills. This situation and the presence of the 150,000 cords of wood in four foot lengths, were conditions well calculated to cause a destructive flood when the dam gave way. When logs and masses of other wreckage piled up against the buildings on Main street the wooden, weaker buildings at the ends of the street finally gave way. What passed out at the west end of the street swung into the mill pond near by and lodged against the hemlock mill just below the street; what went out at the east end passed on down along Freeman Run and swept away numerous buildings in Costello, some miles below Austin, devastating both sides of its main street for a width of twenty rods.

The effect of the flood in Austin was practically to wipe out the very heart of the borough, wrecking homes, places of business, industries, and carrying many to their death. Some of the appended photographs illustrate the completeness of the destruction.

From Austin to Costello Freeman Run pursues a meandering course down through a valley, which narrows considerably just above the village of Costello. On its banks is located the mill of the Emporium Lumber Company, up-stream from which, prior to the flood, stood the piled lumber of the Goodyear Lumber Company. Below the Emporium Lumber Company's plant were the lumber piles belonging to this concern. The lumber of the Goodyear Lumber Company was picked up by the turbulent flood and carried along with the wreckage from above. To a large extent the lumber of the Emporium Lumber Company's plant, or as it is locally known, the "Hardwood Mill," was not carried away.

Below the "Hardwood Mill," in the two mile stretch between it and Costello, stood the Brownless grist mill and three or four farmsteads. The mill was completely destroyed, while the damage suffered at the farmsteads consisted chiefly in washed out crops and in debris piled on the land. The highway bridge, a steel structure, crossing Freeman Run about a mile above the centre of Costello, was wrecked and carried down stream to the confluence with the Sinnemahoning and up this latter stream for several hundred feet. A large steel girder bridge of the Buffalo and Susquehanna Railroad, crossing Freeman Run above the highway bridge, was picked up by the flood and left upside down 250 feet below its abutments. An-

other heavy steel girder bridge crossing the creek just below the Costella station was swept from its abutments and carried down stream a hundred feet and turned over on the bank.

The little village of Costello, clustering about the confluence of Freeman Run and the Sinnemahoning Creek, three and one-half miles south of Austin borough, lies both in Portage Township and in Sylvania Township, in the extreme southwestern corner of Potter County. The Sinnemahoning Creek forms the boundary line in the village between these townships, Portage lying to the east and Sylvania to the west. Below the confluence of the two streams, the Sinnemahoning Creek flows almost due south for 24 miles to Sinnemahoning, here receiving tributaries from the west, flowing thence easterly for ten miles to Keating, where it unites with the West Branch of the Susquehanna River.

Comparatively speaking the flood damage in Costello was confined to that part of the village lying in Portage Township; that is, the part first reached by the water. Beginning up-stream at Brownlee's mill, situated near the State highway crossing over Freeman's Run, the onrushing flood cut a swath through the upper end of the town, spreading over the flats lying between the roadway and Freeman's Run in the village, and, striking the densely settled business centre near the Buffalo and Susquehanna Railroad Station, swept on to its junction with the Sinnemahoning, here overflowing its banks into Sylvania Township and leaving in its wake a trail of wrecked and damaged buildings. As it reached the Sinnemahoning the back-wash rushed up this stream, carrying with it the body of an Austin girl and much debris. Spreading over into Sylvania Township the water damaged some of the tenements and one building of the plant of the Camden Tannery.

Below Costello the valley of the Sinnemahoning widens considerably and, in traversing this section of the stream the flood spread out and soon lost its energy. It, however, carried along much lumber and pulp wood, comparatively large piles of drift being found more than two miles beyond Costello. About one mile below the village the head of a young woman was recovered shortly after the flood passed. This was identified as the head of a Polish girl, a resident of Austin. Her headless body was recovered after many days at the upper end of the "Hardwood Mill."

Herbert Young, a resident of Costello and an employee of the "Hardwood Mill," learned the news of the flood while working at the mill. Jumping on a bicycle, he sped down the road to Costello spreading the alarm as he rode. To this action is no doubt due to the fact that, of the entire village population, only one person lost her life. Her body was recovered on October 7th, a short distance below the point where the Buffalo & Susquehanna Railroad crosses

the Sinnemahoning Creek. This is immediately below the town. Above Costello, at the Brownless grist mill, another life was lost, that of a farmer who was at the mill with his team; he had ample warning but delayed.

Just above the water line in Austin itself on either side of the valley had been left a little fringe of houses. In these the survivors had taken refuge, and there had awaited help, for they were without food and many in want of clothing. They were demoralized by the absence of news as to what had become of their families and friends. The water supply and lighting systems of the Borough had been destroyed.

It was pleasing, however, to see the men representing the State Departments, cool, deliberate, and determined in their efforts to relieve suffering. Our doctors found very few sick and wounded, owing to the fact that those who were caught in the logs being dashed about by hydraulic force had been almost instantly killed and their bodies crushed and bruised, often beyond recognition. The food that had arrived was being cooked and distributed by our nurses. Our engineers were preparing to build a temporary bridge across the stream. The water and gas systems were being reconstructed and the medical men were organized to look after accident cases and to prevent disease such as generally follows like disasters.

After the constable of the borough had vainly tried to gather a protective posse among the citizens of Austin, the re-establishment of order and the prevention of further thievery and pillage was made possible by the timely arrival of a troop of the State Police under Lieutenant William E. Mair. This troop had left Harrisburg in the middle of the night and was brought into Austin only a few hours after the entrance of the first detachment of officials of the Department of Health. Other troops of the State Police were sent later; one of them came in Sunday afternoon in charge of Captain J. T. Robinson who assumed command of these forces. During our entire stay at Austin these thoroughly trained and capable men were of the greatest possible assistance to us in carrying on the work we had come to do.

It was gratifying to realize that Pennsylvania's government was so organized that, after such an unexpected catastrophe in a remote part of the State, relief sufficient to prevent suffering had come to the people in the valley inside of sixteen hours.

Odd Fellows' Hall, situate above high water mark, was offered for the use of the Home Relief Committee and those representing the State. The first floor was used for cooking, dining and the distribution of food, while the second story furnished office room and floor room for mattresses where our people could rest when opportunity offered.

The census, so far as investigation had then gone, pointed to a probable total of less than one hundred human deaths, instead of seven hundred or yet larger figures as first reported. There was still, however, some uncertainty as to the presence in the town at the time of the disaster of persons living at a distance who had come in to vote, to shop, or to amuse themselves.

The several Departments of the Government were working in perfect harmony. Each seemed anxious to work with the other.

The influx of curious strangers during Sunday had been very great and it speedily became clear that visitors from simple curiosity, not to speak of vandals looking for plunder, would interfere with the work of recovery. Therefore, on Monday a County Medical Inspector, accompanied by a member of the State Constabulary, was put on duty at Keating Summit, the gateway to Austin, on the Buffalo & Susquehanna Railroad, to take over the regulation of the passenger traffic and the movement of the relief trains. The passenger agent at once placed himself under the orders of the Department, posting a notice that passenger traffic to Austin was suspended, and gave our representative the freedom of his office. Mere sightseers who evidently had no intention of working were turned back and none but relatives or those having legitimate business were allowed to pass. A railroad conductor, long resident at Austin and well acquainted with all the families of the neighborhood, was most helpful in making such discriminations. This greatly relieved the situation. Our supervision of the railroad was continued for a week and on October 9th, the agent of the Buffalo & Susquehanna Railroad was notified that the embargo was removed, and the County Inspector returned to his home.

At the very beginning of the calamity the service of the telephone had been of incalculable value. When the disaster was seen to be inevitable a message to the central office was sent from a house near the breaking dam by an occupant who thus redeemed her checkered career by becoming an angel of mercy. At the telephone exchange the young woman in charge, Kathleen Lyons, stuck pluckily to her work sending out warnings as fast and widely as possible until she was compelled to flee to save her life. Soon after this the service was rapidly crippled. Through that night and particularly during Sunday direct communication with the outside world was difficult and at times impossible. The Bell Telephone Company began repair work and the establishment of a new exchange with commendable promptness early Sunday morning. Not until Monday morning, however, was it possible to send messages any distance so as to engage laborers and send out orders for such materials and tools as were imperatively needed. From this time on it became comparatively easy to obtain workmen and by Tuesday night

first Sunday, before the Department through lack of the telephone was able to arrange for the importation of workmen, the Goodyear Lumber Company had men at work at its mill while the Buffalo & Susquehanna Railroad Company had a gang trying to clean up and restore its line. That afternoon a wrecking crew of the Pennsylvania Railroad Company was overhauling wreckage in the search of bodies. In the following days the examination of the piles of debris was conducted more systematically and many more men were at work all under the supervision of the Department but not all actually in its employ. On eight different days the number was well over a thousand, including the forces at Costello, and on one day there were nearly fifteen hundred men at work. In this enumeration is counted the force of the State Highway Department engaged in making passable the State road in Austin under the direction of Division Engineer E. M. Jackson, who placed himself under the general direction of the Commissioner of Health. Many details concerning these gangs of laborers and the work done by them will be found in the report of the Division of Sanitary Engineering later in the book, and need not be repeated here. In this place I desire to acknowledge our indebtedness to Lewis T. Furman, Mayor of Buffalo, New York, and William E. Robinson, President of the Chamber of Commerce of that city who sent two separate bodies of men from Buffalo to Austin; to the Pennsylvania Railroad Company for sending two very useful gangs, especially one wrecking crew made up of experienced track workers, in charge of S. H. Kuhn, bringing their own bunk cars and supplies, and working very successfully as long as they could be spared from railroad work; also to the Lackawanna Steel Company of Buffalo for sending an exceptionally efficient company of forty-five men who did very admirable work for ten days and whose superintendent, F. W. Bond, became our general superintendent in charge of all our foremen and gangs.

On the evening of Tuesday, the third of October, Governor John K. Tener, Adjutant General Stewart and party arrived in their special train and we met them and proceeded to Odd Fellows' Hall, where the Home Committee and a number of citizens joined us. The entire situation was discussed. Later the Governor met the heads of the Departments, doctors, nurses, and the representatives of the Press. We then escorted the party back to their train and left them for the night to try to get some rest that they might be better prepared to review the situation in the morning. I then made my midnight rounds and found everything proceeding satisfactorily. In the morning we crossed the stream on our newly constructed bridge and succeeded in reaching the Austin Hospital site overlooking the valley. From here the party got a good view of the flats where

the buildings of a busy borough had been less than four days before. As we looked upon the sandy valley, with the stream tortuously finding its way to the great piles of debris in the lower part of the town and stretching far beyond, apparently without end, the task seemed almost hopeless. From there we tried to carry our visitors up to the dam but had to abandon the undertaking and return to the train. Shortly after reaching his car, the Governor returned to Harrisburg leaving me in charge. Each night during our stay in the valley a message was sent to the Governor giving an account of the progress made during the last twenty-four hours.

Austin had depended on natural gas for light and also for fuel. Much of the pipe system was destroyed in the flood but it was possible to repair some portions in the western part of the borough on Sunday so that by Monday gas was available for use in most of the houses that remained habitable. It was found, however, that this supply could not be used to enable us to work a night shift that might recover the bodies more rapidly. The General Electric Company of Schenectady came to our assistance by proposing to install a temporary electric lighting plant. Mr. F. C. Barton of the Schenectady works arrived at Austin at noon on Friday, October sixth, and the first and principal instalment of apparatus on the day following. The machinery was transferred to a box car which was used as a temporary power house. Pole lines were erected and eight arc lamps hung, Mr. J. C. L. Harris of the Philadelphia office with a construction force arriving at noon. The plant was tested out with gasoline secured from a wrecked automobile and was ready to operate at noon of the eighth. On the ninth three more arc lamps were installed, the latter being used at the laborers' mess tent, the cook tent, and the officers' mess tent. An illustrated account of this very excellent installation was later published in the General Electric Review. This important service of the General Electric Company was entirely gratuitous and made not only the Department but the borough deeply indebted.

The large mess tent from the State Arsenal had been erected by Major Finney. It was placed on the flats and served as a place for feeding the large gangs of laborers employed. These arrangements were completed so that the tent began to be used on Wednesday, October fourth. This tent is clearly seen in one of the pictures.

When the Department's County Medical Inspector for Potter County arrived at Austin, a little more than two hours after the demolition of the dam, he at once realized that the doctors of the place would be quite unable for some time to attend cases or conduct the hospital. Accordingly he went to the hospital and proceeded to undertake the management of the establishment until the physicians of Austin should be ready to assume control again. Pre-

sently other physicians from Coudersport and Port Allegany arrived. So complete was the work of the flood that few of its immediate victims were brought to the hospital. Most of the cases that came in that night were suffering from shock; few needed more care than a dry, warm bed and restoratives, and by eleven o'clock all cases had received attention and the last bandage was completed. Later on in the night yet other physicians came in from Smethport, Renovo, Williamsport, and Olean, but as there was little need of purely medical aid, they presently returned home. Our representative remained in charge of the hospital until October tenth and gives much praise to the nurses for their willingness to undertake the varied duties assigned them when it became necessary to take care of the State Police and for several days to feed some two hundred persons in addition to the regular occupants of the hospital. Special commendation is given to the matron, Miss Elizabeth Dorchester, for the ability and cheerfulness with which she met every emergency. Altogether only nine persons were admitted to the general hospital as victims of the flood. There were one broken thigh, one broken leg, one rupture of internal ligaments of the knee, two broken collar bones, and one infected wound of the foot, besides some contusions and lacerations. One patient died of pneumonia a week after admission.

The employment of a large force of workmen to tear apart the immense piles of demolished buildings throughout the valley in the search for the dead, and make such temporary installations as were necessary, involved also the possibility of accidents and injuries to these men. The Austin General Hospital was small and not conveniently situated for the treatment of such persons, and I decided to establish a First Aid Station for this purpose and place it in charge of one of our medical officers with two assistants and a nurse.

A hospital tent with its outfit was procured from the supplies provided by the Adjutant General and a place on the flats, about 300 feet above Main street, was selected as a suitable location. It developed that there was a deposit of fourteen inches of sand all over the old portion of the town making it difficult to put up a tent with stakes. For that reason a frame structure of long heavy beams was built on the surface of the ground, a good floor put down upon it, and the tent erected on this; the guy ropes were fastened to the beams.

We opened this station at one o'clock P. M. on October 2nd. By the end of ten days the local physicians had sufficiently recovered and adjusted themselves to their new conditions to be able again to assume charge of the General Hospital, and it was accordingly turned over to them. The First Aid Station was now placed in

charge of the County Medical Inspector, hitherto at the hospital on the hill, thus allowing the physicians from a distance to return to their homes. This service was continued for four days longer when the Station was closed and the tent removed. The daily reports shows that the staff of the Station ministered to the needs of nearly 120 persons. None of the cases was serious and they were about equally medical and surgical in character. Besides one small abscess, there were 59 wounds of various kinds—described as: 24 lacerated, 8 incised, 7 punctured, 4 infected, 11 abrasions, and 5 contusions—and there were of course a large number of secondary dressings not reported in detail. So thoroughly had the flood done its work that there was little nursing left to be done, and thus we were able to devote our nursing force to the very important and most urgent business of cooking and serving food, comforting the distressed, and distributing clothing.

Another important activity of the Department was to provide for the proper care of the bodies of the dead pending identification, and ultimately to arrange for a suitable disposal of the remains should they prove to be unrecognizable. This involved also a carefully recorded description of each body, whenever there was likely to be any difficulty of recognition, together with a full and explicit statement of everything found on it or with it which might be an aid in establishing its identity even after the interment, which of course could not be long delayed. Almost as soon as the recovery of bodies could be begun the undertakers arranged to place the corpses in their establishments, so that by the time the advance guard of the Department of Health reached Austin three different morgues had been established. It was at once obvious that such an arrangement would lead to endless confusion and many serious complications. Accordingly a small house in a convenient location was selected to be the official and only morgue to which all human remains should be brought. Close to this house tents were erected where the bodies could be prepared for public inspection and coffins stored for use when it became possible to turn over the bodies to the undertakers for burial.

The search for the dead went on as rapidly as possible. Immense masses of wreckage had to be overturned and every place examined where a body could be concealed and become a source of danger or merely disagreeable. At the First Aid Station a large supply of suitable disinfectants was kept ready to be drawn upon whenever the condition of a freshly found body or the carcass of some animal required their use.

For a time there was great uncertainty as to the number of bodies we might expect to find. Just after the disaster the wildest conjectures were made of the probable loss of life and the figures guessed at ran up far in the hundreds; some persons even predicted

a loss of a full thousand. It soon became evident that all such figures were the grossest exaggerations, although there were difficulties at first in determining how many outsiders might have been in town on a Saturday afternoon. As soon as possible a census of the town was arranged for, and we were fortunately able to obtain the aid of two men, Messrs. Kelly and Cochran, who had made the official census the year before and were believed to know everyone for miles around. Their examination soon gave the comforting assurance that far fewer were missing than had been commonly supposed. The entire loss of life was finally determined to be seventy-seven or, at least, it was ascertained that this number of persons were missing, the only uncertainty in this enumeration being apparently the possibility that there may have been unnoted strangers in the town or that a few families may have moved away hurriedly in despair just after the flood and without giving any account of their losses. Such a disappearance of a family or two, quite hopelessly dazed by the catastrophe, is by no means improbable. There were also a few foreign households, recent arrivals, for which the number of children could not be exactly learned.

The condition of the bodies as recovered made it evident that death was caused far more generally by crushing or mechanical injury than by mere drowning. In some cases fire had contributed much to increase the difficulty of identifying such remains as were recovered. The majority of the bodies that came to the morgue were nude and badly crushed.

The Department began the conduct of this morgue on Sunday afternoon, October first, when thirteen bodies were gathered in from the various places where they had been stored. Record was also made of five other bodies which had been found and taken to their homes, making in all eighteen bodies found on Sunday and all identified with the exception of two females. The staff at the morgue was then enlarged by the addition of two dispensary nurses to aid the chief in his work. He reports that there were brought to the morgue on Monday eleven bodies, including one head, which was later identified, and a child of about three years which could not be recognized; on Tuesday nine bodies came in, among them a much charred skull; on Wednesday seven bodies were received, two being merely masses of charred bones gathered from an engine pit of the round house, only the lower jaws being distinguishable, and another badly burned; on Thursday five bodies were brought in, one of them merely the two lower limbs of a very large woman; on Friday there were also five and among these there were two much burnt bodies, one being nothing but a mass of charred bones; on Saturday five more came in and on Sunday only two. On Monday morning, October 9th, the morgue was turned over to the local committee to be thenceforth conducted by them.

Up to this time there had been recovered 62 bodies, including those removed directly to their homes. For five out of these 62 bodies not even the sex could be determined. Of the remaining 57 persons, 19 were males (9 adults and 10 boys) and 38 females (36 adults and 2 girls). Four of the males and two of the females could not be identified. The identification often rested on such slight evidence as a hair ribbon or some peculiarity of a recently repaired shoe heel; sometimes the evidence was merely the conformation of the jaw or the number and appearance of teeth, real or false. In several instances the rings of the fingers or the color of the hair furnished the clue; one woman was recognized by a bag containing her jewelry.

To make the necessary records relating to the identification of the dead and the preservation of any valuable or other property found with them, and to issue permits for burial, etc., the local registrar was aided by a representative of the central bureau at Harrisburg who brought a fresh supply of the requisite blanks that there might not be any delay. For the convenience of the friends, the undertakers, the insurance agents, and any others concerned with these matters a special, temporary registration office was established at the morgue.

After the morgue was put in the hands of the local authorities on the morning of October 9th other bodies were recovered. On Monday, October 9th, two bodies were found, one of them that of a baby of eight weeks; on Tuesday there came in two female bodies, one of which was doubtfully identified; on Thursday, the 12th, two bodies were found and identified, one of them by the teeth when examined by a dentist who recognized the mouth; on Saturday, October 14th, two bodies were brought to the morgue but only one could be positively identified; nine days later a female body was found among the lumber heaps at the "Hardwood Mills" and on October 26th near the same place a headless female body was found and identified as belonging to the head found far down the valley at the very beginning of the search three weeks and a half before. To this list should be added a body belonging to Costello, found there and promptly identified on October 7th, and the death which occurred in the hospital as the result of exposure in the flood. This makes a total of seventy-three bodies more or less definitely recognized as victims of the Austin calamity. If our census of the missing really was correct only four bodies failed to be recovered.

At Austin as elsewhere the first object of our work was to recover the bodies of the dead persons killed by the flood and to make harmless by burial or combustion any carcasses of animals that had been killed. Along with this went an effort to care for the living by making their surroundings as sanitary as possible. An account of the

water supply at Austin and of our efforts to restore it, and also to prevent the use of dangerous wells and springs is given in the report of the Division of Sanitary Engineering where will also be found the letters on this subject. The system was so far re-established by October 11th that it could be turned over to the authorities of the borough the next day to be cared for and operated by them. As to the sewerage system, if the town could be said to have anything of the kind, we did what we could under the circumstances.

It is imposible to make any full and complete acknowledgment of all the courtesy shown the Department during the time of our endeavors at Austin. I have mentioned the gangs of men sent us by the railroad companies and the important work done by these gangs, but that by no means covers all the service rendered us by the railroad companies. In every matter of transportation of men and parcels—particularly where expedition added much to the usefulness of material—our wishes were met more than half way. The Pennsylvania Railroad Company made a very material contribution to relieving the situation by giving free transportation to many dwellers in Austin who desired to get to their relatives or, in their despair, merely wished to get away.

The Bell Telephone Company, through its District Superintendent, Mr. John Bailey, gave us every possible privilege as soon as communication was established. Our obligations to this Company were still further increased by the erection of a temporary line to Costello, on make-shift poles of stray pieces of lumber, which greatly simplified the management of our work in that place.

Somewhat similar was our indebtedness to the Western Union Telegraph Company. This service was not completely destroyed when the railroad tracks and stations were washed away or buried beneath the rubbish. A part of the wires was ruined and the line was but partially open at one end and only in one direction. The strain on the service even after the restoration of the wires was great owing to the presence of many newspaper correspondents who had long and frequent "stories" to send out, but we were given liberal facilities in getting our messages through.

The State Board of Public Charities had representatives coming and going and sought to lessen the burdens which the Department had assumed. In several instances places were found for children partially or wholly orphaned by the calamity and the Board took such children to new homes where they would be cared for.

Very early in the relief work, among almost countless offers of aid, a telegram came to us from Dr. James Tyson in behalf of the State Medical Society, of which he was President at the time, asking if the services of more physicians were desired. In replying we were able to thank him very heartily for this courtesy and say that

the staff already on the ground seemed ample to meet all possible demands for medical attendance. The Medical Society later aided the doctors of Austin to replace in some measure the books and instruments which they had lost.

I have already indicated the value of the lighting plant installed by the General Electric Company. I add a portion of our later correspondence which is self-explanatory:

Harrisburg, Pa.,

October 23, 1911.

Mr. Caryl D. Hoskins,
Manager Lighting Department,
General Electric Co.,
Schenectady, N. Y.

Dear Sir:—I wish to thank you for your courteous letter of the 21st. The temporary lighting plant which the General Electric Company so promptly offered as an aid to the relief of Austin was of the greatest service in facilitating the work of searching for bodies and removing the debris. It doubled the working time. Besides this it made easier the policing of the wrecked town.

I wish to thank you for the effective aid which your plant rendered in the State relief work at Austin.

Very truly yours,

SAMUEL G. DIXON,
Commissioner of Health.

Schenectady, N. Y.,

October 26, 1911.

Dr. Samuel G. Dixon,
Commissioner Department of Health,
Commonwealth of Pennsylvania,
Harrisburg, Pa.

My Dear Sir:—I desire to thank you for your expressions of appreciation in connection with the efforts which were made by the General Electric Company to assist, within the confines of its specialty, in the carrying out of the magnificent work which marked the activities of the State organizations at Austin after the disastrous flood. It is a pleasure to us and to me that we contributed even in a small measure to the welfare of the citizens of Pennsylvania.

Very truly yours,

CARYL D. HOSKINS,
Manager Lighting Department.

The great kindness of the Mayor of Buffalo, a fine example of neighborly courtesy, deserves particular mention in this report. Allusion has already been made to his timely efforts to send us laborers. In other ways his help was of great value to us. During the first few days of the relief work, before regular shipments of supplies could be arranged for, it was the Mayor of Buffalo who needed but a word from us to get together whole car loads of provisions and send them on to Austin in the most expeditious manner. It was largely due to his activity that our supplies from the first were such that we could easily satisfy every reasonable demand. His influence with the merchants of Buffalo was of importance in enabling us to perfect satisfactory arrangements for regular shipments of such things as we needed and when this was accomplished we were no longer obliged to make use of his eagerness to aid.

Considerable contributions of money came also to the Commissioner at Austin. The money came from many sources and in no small measure from personal friends. A list of the contributions and the amounts sent by them appears in the report of the Division of Accounting at the end of this annual report.

In addition to these cash contributions, the Commissioner received large quantities of garments of various kinds and other articles suited to the needs of those whose dwellings had been demolished and their household outfits swept away in the flood or destroyed by fire. These gifts came from many places, being often gathered by the efforts of personal friends of the Commissioner or other officers of the Department. This material came in such quantities and in such packages, sometimes by the car load, that it was difficult to keep any exact record of the receipt and it is now quite impossible to give due credit to the givers, much as I should like to do it. All clothing and similar supplies as they came to us were placed at first in charge of Major Finney, who also had charge of blankets and mattresses. Later the clothing was cared for by Dr. R. F. Trainer and the distribution of such articles was carefully supervised by him in order that every needy person should be aided. In doing this much assistance was rendered by small committees selected by the local aid association. A portion of the clothing and other supplies was diverted to Costello where the engineer in charge conducted the distribution to the families made destitute by the flood. In this he was aided by a committee of the village and particularly by Mr. D. F. Bartoo, a teacher in the school of Sylvania Township. In Austin the local committee had been early organized, becoming later a part of a very active Austin Relief Association, which was formed by many public spirited citizens of Potter County. This Association received large sums of money and many supplies, and later published a detailed report of its receipts and expenditures.

The Department of Health feels justified in making the assertion that its share in the relief work at Austin fully demonstrated the efficiency of the Department and the wisdom of those who created and sustained it. The effectiveness of this work was recognized by all who had any understanding of the situation. Then and later we received abundant assurance that the work we did at Austin was work well done. Quite at the beginning of this work a representative of the American Red Cross, Mr. Ernest P. Bicknell, came promptly to Austin but speedily returned to Washington on finding no occasion to remain. A telegram was presently sent to Governor Tener and afterwards made public. This telegram indicated that the Department of Health and the Constabulary had the situation well in hand. The dispatch continued: "We congratulate Pennsylvania on the prompt and efficient manner in which it has met this emergency. It is obvious that the assistance of the Red Cross is not at this time required, but we shall hold ourselves in readiness to respond promptly. Should later developments indicate the need do not hesitate to call upon us." As no such necessity arose, the Red Cross was not called upon.

During our stay at Austin the following members of the Department of Health were on duty, at least a part of the time. Except among the chief officers there were frequent changes. Men came and went according to the exigencies of the work in hand or the demand for their services elsewhere. Many other officials of the Department in the offices at Harrisburg or Philadelphia shared also, directly or indirectly, in the unusual obligations put upon us by the catastrophe although not actually in the field. The field force was this:

In charge: Samuel G. Dixon, M. D., Commissioner.

General Aide: Mr. H. Lindley Hosford, Secretary to the Commission.

Medical Officers: B. Franklin Royer, M. D.; Thomas H. A. Sites, M. D.

County Medical Inspectors: Edwin H. Ashcraft, M. D.; Harvey B. Bashore, M. D.; Harry S. Falk, M. D.; Richard H. Simmons, M. D.

Other Physicians and Health Officers: Daniel E. Baker, F. E. Dinehart, William T. Douglass, M. D.; Claude J. B. Flowers, M. D.; Charles L. Fullmer, M. D.; William Harler, John W. MacMullen, M. D.; Clarence M. Malone, M. D.; William A. Ostrander, M. D.; Clarence R. Phillips, M. D.; Edward R. Plank, M. D.; Robert F. Trainer, M. D.; Robert B. Tule, M. D.; William T. Williams, M. D.

Nurses under direction of Head Nurse, Miss Alice O'Halloran: Miss Edith Bottorf, Miss Sara Butler, Miss Anna Gorman, Miss Elsie Hatfield, Miss Anna Hileman, Miss Anna Kutzer, Miss Jessie McClure, Miss Eva Rebeck, Miss Helen Roth, Miss Lucy Shellenberger, Miss Jennie Simmons, Miss Sara Smith, Miss M. Blanche Yowler.



Division of Medical Inspection.

B. FRANKLIN ROYER, M. D.,
Chief Medical Inspector.



DIVISION OF MEDICAL INSPECTION.

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Conferences—Public Health, Pennsylvania State Game and Fish Protective Association, B. Franklin Royer; Philadelphia Osteopathic Society, B. Franklin Royer; Jonestown, Lebanon County, C. J. Hunt; Lebanon, Lebanon County, C. J. Hunt.

ORGANIZATION AND ADMINISTRATION.

No change has occurred in the executive officers in this Division during the year 1911. Dr. Charles Jack Hunt continues in the position of Associate Chief Medical Inspector.

The stenographic and clerical force remain practically the same as in 1910, one resignation occurring in the stenographic corps in the person of Miss Maud Ferris of Waterford, Erie County. In the clerical corps, Miss Esther Shaub of Lancaster resigned and was succeeded by Miss Florence Eckert of Lancaster.

The corps of County Medical Inspectors suffered losses by death and resignation. Dr. S. M. Woodburn, County Medical Inspector of Bradford County, Towanda, died February 23, 1911. The vacancy caused by his demise was filled by the appointment of Dr. T. Ben

Johnson of Towanda. Dr. J. F. Harris of Bellefonte, County Medical Inspector of Centre County, died in August and the position is vacant as the year ends. Two resignations occurred in this corps. Dr. John F. Grube, Punxsutawney, County Medical Inspector in Jefferson county resigned in the latter part of August, and was succeeded by Dr. S. Meigs Beyer of Punxsutawney. Dr. Michael V. Vall of Warren, County Medical Inspector of Warren county, resigned in November and was succeeded by Dr. C. W. Schmehl of Warren.

The corps of health officers has been maintained as in previous years, the greater number of men appointed in 1907 continuing on the corps. During the year, 108 vacancies occurred by resignation and 8 vacancies by death.

FIELD WORK.

A great deal of assistance was rendered by the Chief Medical Inspector and Associate Chief Medical Inspector in handling outbreaks of communicable disease in various sections of the Commonwealth. Outbreaks of typhoid fever called for more assistance from the Medical Division than any other disease. The most notable outbreaks occurred in Erie and Bethlehem; a special report of each of these outbreaks is found further along in this report. It is worthy of note, however, that fewer cases of typhoid fever occurred in 1911 than was reported in 1910. Practically 2,000 less cases occurred in the Commonwealth notwithstanding the serious epidemic in Erie and 170 fewer persons died from this disease than in 1910. A number of other outbreaks of typhoid fever occurred in various sections of the Commonwealth where representatives of the Engineering Division were present; Austin, Potter County, 38 cases; Parker, Armstrong County, 72 cases—during this outbreak a great deal of time was given by County Medical Inspector T. N. McKee; Marysville; Athens; Sayre; Montgomery; Millville; Patton and Tarentum.

During the early part of the year a census card was designed for use in making house to house canvasses in tracing the source of infection in the various outbreaks of communicable disease, particularly in typhoid fever. This card has been found to be of such great value that it is now being used in each epidemic of typhoid fever, diphtheria and scarlet fever studied by the Medical Division and it is used routinely by the Engineering Division in running down possible source of typhoid infection. It is herewith reproduced:

Form 66.

No.....

COMMONWEALTH OF PENNSYLVANIA, DEPARTMENT OF HEALTH.
CENSUS CARD.

Patient, Township, County,
Householder, Address,
Owner, Address,
Male. Black. Married.

Age, Female. White. Single. Widowed. Occupation,
 Name and address of employer or school,
 Where taken sick? Date of first feeling sick,
 Doctor's name and address, Date of first visit,
 Nurse's name, How long attending,
 Total population of household, No. of other cases in household,
 Visitors to premises within 30 days?

Name,Address,.....
Yes.

No. _____
Where have visits been made within 30 days? _____

Visits to other cases? Yes. No. *Food or drink taken? Yes. No.

Yes.
No.
Sick room screened? Water used at home at work

Sick room screened? Water used at home,at work,.....
Other water used within 30 days,

Milk supplied by In bottles. How long from can,
 Cans.

Other sources within 30 days,
To whom is milk furnished?

*When food or drink was taken during visit give data under Remarks.

Ice cream within 30 days? Yes. Where purchased?
No.

[illegible]

Uncooked vegetables or fruits within 30 days? Yes. Where grown?

Name of dealer supplying ice, NO. Where harvested?

Drinking cups, table ware, etc., boiled? $\begin{matrix} \text{Yes.} \\ \text{No.} \end{matrix}$ Sewer connection? $\begin{matrix} \text{Yes.} \\ \text{No.} \end{matrix}$ Privy? $\begin{matrix} \text{Yes.} \\ \text{No.} \end{matrix}$

How are stools and urine disinfected?	1961	1961	1961
Disposal of stools and urine	Spit	Spit	Spit
Source	Drain	Canal	Buried

Are stools and urine at any time exposed to insects, flies, etc., Yes. No.

Garbage disposal, Kitchen waste, Wash water,
Have they unslacked or chlorinated lime? Yes. No. What other disinfectants?

How and where used?
 Animals—Cats, Dogs, Goats, Birds, Chickens. Rats, Mice?

.....Circular left,House placarded,

Abatement notices,What for?
Remarks:

Data obtained by:

No serious epidemics of scarlet fever occurred anywhere. The Department was called upon in several instances to send either the Chief Medical Inspector or Associate Chief Medical Inspector for the purpose of establishing diagnoses in large boarding schools or in a few instances to consult with local authorities as to the best methods of handling outbreaks.

Diphtheria outbreaks called for assistance in three instances; once in the city of Lancaster, once in East Stroudsburg, where students of the State Normal School were affected, and once in the borough of Steelton.

The only outbreak of smallpox occurring during the year that reached threatening proportions was that in the vicinity of Waynes-Boro in Franklin county, a total of 82 cases occurring during May

and June. A great deal of time was given to this outbreak by County Medical Inspector Bonbrake and the Chief Medical Inspector and Associate Chief Medical Inspector.

Visits were made by the Chief Medical Inspector to Danville, Kennett Square and York and by the Associate Chief Medical Inspector to Walker Township, Juniata County, Marcus Hook in the City of York for the purpose of establishing the diagnosis in cases alleged to be smallpox.

Poliomyelitis was not unduly prevalent anywhere in the Commonwealth. A few trips were made to various sections of the State to assist in establishing the diagnosis.

Alleged outbreaks of gastro-intestinal disease and bacillary dysentery were investigated by the Associate Chief Medical Inspector; one in the City of Lancaster and the other at Iselin in Indiana County—special reports of each follow.

Some idea of the valuable work done by the County Medical Inspectors in the rural districts of their respective counties and in municipalities may be obtained from the abstracts of written reports forwarded after each field investigation.

Important investigations were made for the purpose of definitely determining the diagnosis, as follows:

Variola,	112
Typhoid Fever,	404
Diphtheria,	284
Scarlet Fever,	360
Epidemic Meningitis,	2
Varicella,	506
Pertussis,	321
Measles,	1,281

Many visits were made to milk producing premises for the purpose of establishing safe regulations for the sale of or for arranging to discontinue the sale of milk where the following diseases were under department regulations:

Typhoid Fever,	256
Variola,	1
Diphtheria,	143
Scarlet Fever,	166
Epidemic Meningitis,	2
Stock transferred,	49
Sale of milk stopped,	115

The Health Officers have continued doing a certain amount of routine inspection under the supervision of the Engineering Division. The bulk of their work is performed in connection with establishing legal regulations at premises where contagious diseases occur; some idea of this phase of their work may be obtained by the following brief table, a more detailed summary of their work being found further along in this report.

No forms 34 received,	23,557
No. premises placarded,	18,259
No. premises quarantined,	17,747
No. premises disinfected,	17,090

No. rooms disinfected,	33,915
Air space in cu. ft.,	40,350,777
Formaldehyde Sol. used (pints),	39,079
Pot. Permanganate (measures),	38,368

Sanitary inspection of schools has been discontinued by Health Officers, the work being taken over by the Medical Inspectors appointed under the School Code. This change will necessarily result in a certain amount of loss of income to Health Officers and may show its effect in losing some of our best men.

The largest dairy inspection ever undertaken by the Department's corps of Health Officers was completed during the early part of the year, a total of 166,182 farms being inspected. Detailed tabulation statistics of this work is found in another section of the report.

In the autumn of 1911, in compliance with the School Code, 535 physicians were appointed to make Medical and Sanitary Inspection of Schools in fourth-class districts where no resolution had been adopted notifying us that inspection was not desired.

A circular of instruction, Form 52, was issued to the School Inspectors, the circular being sent them at the time inspection blanks were forwarded.

A total of 3,572 schools and 145,499 pupils were inspected. The circular referred to and record form follow:

Form 52.

COMMONWEALTH OF PENNSYLVANIA.

Rules to be Observed in Performing the Duties of Medical Inspector of Schools.

Tact is a most essential requirement in the successful examination of children. It is more important in these examinations than it is in private practice. The first questions asked should be those that cause the pupil least mental disturbance. Examination of a frightened child might give results that would be misleading.

When you secure the child's confidence, proceed gradually to the tests requiring its co-operation, namely: measurement of vision, testing of hearing, the examination of teeth, tonsils, glands, etc. Teachers can render invaluable service in making these examinations. Their assistance is essential in recording the exact name of pupil, parent or guardian and oft-times in determining the age of the child.

RECORD FORMS. One side of form 51 is to be used in recording the results of the individual physical examinations of each child in the various school rooms. The other side of this form contains spaces for recording the results of the sanitary inspection. In using the form, be careful to enter all records in clear legible writing with ink.

IDENTIFICATION RECORD. On the face side of form 51 record, first, the name of the school, the number of school or grade, the name of the township or borough in which it is located, the county, the name and address of the teacher, the name of the Secretary of the School Board and his address and the total enrollment of the school. After recording these data, enter in the proper place the name of each pupil to be examined and the name of the child's parent or guardian, indicating by figures the age and by a straight line in the proper place, the sex, color and nativity, after which proceed with the detail physical records and when through entering physical records, add the number of pupils examined, the number found defective and the number found normal.

VISION TESTS. Test each eye separately for vision, using Snellen's Chart, preferably in strong North light, at 20 feet, recording in the first space under vision tests for each eye the number of feet printed on the chart above the line of letters which are correctly read. In the second space (C.-D.) you will note corneal defects as follows: Figure 1, slight impairment; figure 2, serious impairment; figure 3, blindness; meaning a corneal scar that completely shuts off light.

After measuring the vision, have the child with its own fingers turn out the lids and expose the conjunctiva and globe; record corneal defects, note the presence of blepharitis, conjunctivitis, folliculosis, iritis or trachoma, entering under "Remarks" the name of any of these diseases found.

HEARING TEST. Test each ear separately for hearing by whispering at twenty feet, training yourself to whisper loud enough that the normal child could distinctly understand you. If the child cannot hear at 20 feet, you will advance toward him until such a distance is reached that he can distinctly hear, recording in the space provided the number of feet where this whisper is distinctly heard. In testing for hearing the pupil should be told to close his eyes during the test. We would suggest that numbers be used and that no special emphasis be placed on any one number. Ask the child to repeat what is whispered. It is necessary to be careful that there is no condition of the wall back of the child which might act as a sounding board.

After recording this test, note the presence of otorrhoea (O. T.) as follows: Figure 1, slight discharge; figure 2, profuse discharge; figure 3, offensive discharge.

BREATHING TESTS. After noting the method of breathing, insert figure 1, if there is slight impairment of nasal breathing; figure 2, if serious impairment; figure 3, if the child breathes entirely through the mouth.

TEETH. In examining the teeth, be careful to avoid placing your fingers inside the child's mouth, expose the teeth by using the wooden tongue depressor provided by the Department. Insert figure 1 in the proper space if the teeth are clean; figure 2, if they are unclean, and figure 3, if they are decayed.

TONSILS. Using the same tongue depressor, next examine the tonsils, inserting figure 1 in the proper space if they are slightly enlarged, figure 2 if they are greatly enlarged and figure 3 if acutely inflamed.

CERVICAL GLANDS. If the cervical glands are enlarged, insert a single straight line in the proper space.

TUBERCULOSIS. Insert a single straight line in the proper space if you suspect any form of tuberculosis to exist. If the patient is anemic and has a hacking cough, with evidence of fever, take the temperature with the clinical thermometer and count the pulse and if you can secure sputum send a specimen to the State Department Laboratory, 2000 Arch St., Philadelphia, in a container which will be furnished on request for that purpose, and in addition, send a special report to the Department of Health, Harrisburg, for every form of tuberculosis found, enclosing it in the envelope with the other records of the school.

NERVOUS DISEASES. Record only chorea and epilepsy, inserting figure 1 for chorea, figure 2 for epilepsy.

SKIN DISEASES. Insert a straight line in the proper space for any one of the following skin diseases; scabies, body lice, impetigo contagiosus, favus, ring worm or lupus. Enter the name of each such disease under "Remarks" and advise the teacher to exclude children having such disease from school and to readmit them only when they present a physician's certificate attesting to their recovery and non-infectiousness.

QUARANTINABLE DISEASES. If any of the following communicable diseases are found, note the name of the disease under "Remarks" and order the exclusion of the child at once, issuing a morbidity report, form 34, to the proper Health Officer: Smallpox, diphtheria, scarlet fever, measles, whooping cough, chicken-pox, German measles and trachoma.

HEAD LICE. Record head lice when found upon the scalp, in the proper column, inserting figure 1 if only nits are seen, figure 2 if in addition, lice are found and figure 3 if the scalp has become crusted as a result. Children with heads so infested are to be excluded from school until certified as clean and non-infectious.

DEFORMITIES. Insert a straight line for deformities and enter the name of the particular deformity under "Remarks."

NUTRITION. In judging general nutrition, insert in the space provided, figure 1 if the nutrition is good, figure 2 if it is fair, figure 3 if it is poor.

SANITARY INSPECTION. On the back of form 51, space is provided for recording the results of the sanitary inspection. Please note that this information is to be recorded under four general headings and a number of subheadings. Check under "Subheadings," the answer you want conveyed and only where conditions are perfect will you allow in the score column the amount indicated for perfect. The total score for any school must not exceed 100.

If drinking water is drawn from a municipal supply then question 1' under "water supply is not to be answered. If on the other hand, water is secured from a local source, then question 1' under "water supply" is to be answered and question 1 will not be answered.

SEWAGE DISPOSAL. Check and score construction and vault, if privies are used. If, however, a modern flush closet system with urinals has been installed, check and score this heading only.

In scoring the various questions asked, consider conditions carefully and rate them as accurately as possible.

Only one complete sanitary inspection is to be made for each building. For each school room, however, provision is made for grading the questions referring to cleanliness, lighting, ventilation and heating. Indicate defect with long arrow where score is low.

Where form 51 does not provide sufficient space for the entire number of pupils in attendance in any particular school or room at the time the inspection is made out, use a second form, indicating that it is the same school or room (Continued.)

FORWARDING RECORDS. The inspection forms for the schools inspected each day are to be sent to the Department at Harrisburg at the close of each day's work, separate envelopes being used for each room. A supply of envelopes will be sent for that purpose.

CAUTION. We caution Medical School Inspectors that under no circumstances are they to advise with parents or guardians of the children examined. The Department will forward duplicate copies of the communication intended for the family, to the teacher, so that the teacher may comply with the law and forward the report to the parents of all children having defects or requiring treatment.

SAMUEL G. DIXON,
Commissioner of Health

November 1, 1911.

The plan worked out for notifying parents of defects was to have form letters filled in by the clerical staff and to have them forwarded in duplicate to the teacher accompanied by stamped envelopes with instructions to the teacher that she should forward the one copy of the letter to the parents, keeping the duplicate copy for herself and further, that she should return to the Department at the end of the year in the stamped envelope enclosed with the package, the duplicate letter with her notes on the back as to whether or not the defect had been remedied or if treatment had been secured and her impression of the results. These form letters and the teacher's letter follow:

Form 53.

COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF HEALTH.

Harrisburg, Pa.,1911.

Dear

You are hereby notified that the examination of made by the Department of Health's Medical Inspector of Schools, apparently shows that has some affection of the and we would advise you, for the good of the child, to consult your family doctor relative to treatment.

Yours very truly,

SAMUEL G. DIXON,
Commissioner of Health.

This copy is to be kept in your school until the end of the school year and then forwarded to the Department of Health at Harrisburg, with your notes written thereon advising us if treatment was given and your opinion of the result.

Form 53-A.

COMMONWEALTH OF PENNSYLVANIA,

DEPARTMENT OF HEALTH.

Harrisburg, Pa.,1911.

Dear

The examination of made by the Department of Health's Medical Inspector of Schools shows that needs to have the teeth carefully cleansed each day and we would advise you for the good of the child to use every care to preserve the teeth from decay.

Yours very truly,

SAMUEL G. DIXON,
Commissioner of Health.

This copy is to be kept in your school until the end of the school year and then forwarded to the Department of Health at Harrisburg, with your notes written thereon advising us if treatment was given and your opinion of the result.

Form 53-B.

COMMONWEALTH OF PENNSYLVANIA,

DEPARTMENT OF HEALTH.

Harrisburg, Pa.,1911.

Dear

The examination of made by the Department of Health's Medical Inspector of Schools shows that has some

affection of the teeth causing them to decay. We would advise you for the good of the child to consult your family dentist relative to treatment.

Yours very truly,

SAMUEL G. DIXON,
Commissioner of Health.

This copy is to be kept in your school until the end of the school year and then forwarded to the Department of Health at Harrisburg, with your notes written thereon advising us if treatment was given and your opinion of the result.

Form 53-C.

COMMONWEALTH OF PENNSYLVANIA,
DEPARTMENT OF HEALTH.

Harrisburg, Pa.,1911.

Dear

Your are hereby notified that the examination of made by the Department of Health's Medical Inspector of Schools apparently shows that has some affection of the lungs, probably tuberculosis. We would advise you, for the good of the child, to consult your family doctor relative to treatment. If you are not in a position to employ a physician you can have the child examined at the Department's Tuberculosis Dispensary, located in This dispensary is open from to o'clock.

Yours very truly,

SAMUEL G. DIXON,
Commissioner of Health.

This copy is to be kept in your school until the end of the school year and then forwarded to the Department of Health at Harrisburg, with your notes written thereon advising us if treatment was given and your opinion of the result.

It is most gratifying to find that of almost 130,000 letters sent to parents calling attention to defects found in their children, many notes of appreciation reached us from parents.

In addition to the letters going to the parents, nearly 4,000 letters were sent to Secretaries of School Boards calling attention to the insanitary conditions found, no exception being taken by School Boards to any of the Inspectors' findings.

Too much praise cannot be given teachers for their hearty co-operation with the Department in returning the duplicate copy of the letters forwarded at the end of the session, noting thereon if treatment was secured for the particular defect mentioned and their impression of the results. With the work starting so late in the season, we had hardly expected such complete co-operation from teachers and certainly could not have expected parents to respond so quickly to the advice given.

The first year's inspection is encouraging. The one feature about the work that is not entirely satisfactory is that so many of the School Boards voted against having inspection. In adopting these resolutions we are convinced that many of them were not fully informed as to who should bear the expense of the inspection. The School Code not being in general circulation, School Boards acted without having it before them at the time they adopted their resolutions. It is to be hoped that in subsequent inspections all School

Boards will co-operate and welcome it rather than resent it. Judging from the correspondence, the resolutions adopted by Boards not favoring it, were some times passed because the sanitary standards were far below the Code's requirements. It would seem as though the Department might well make a sanitary inspection in every one of these districts where Medical Inspection is not desired.

It is of some interest to note that of the 145,499 pupils examined, 111,621 were defective in some way, more than 36,000 of them having defective vision, more than 5,000 having defective hearing, 11,000 defective breathing, 70,000 defective teeth, 12,000 enlarged cervical glands. Detailed tabulated statistics are found in another section of this report.

The following fourth-class school districts did not pass resolutions against Medical Inspection, hence the Department performed both medical and sanitary inspection, appointing local physicians to do the work. A list of these physicians arranged by County is found in an earlier page in this volume:

ADAMS COUNTY. Boroughs: Bendersville, McSherrystown, Gettysburg, York Springs. Townships: Franklin, Berwick, Conewago, Mt. Pleasant, Straban, Highland, Huntingdon, Liberty, Tyrone.

ALLEGHENY COUNTY. Boroughs: Bridgeville, East McKeesport, Edgewood, Edgeworth, Spring Garden, Oakmont, Thornburg, Turtle Creek, Port Vue, Haysville, Osborne, Cheswick, Hays, Ingram, Westview. Townships: Bethel, Leet, Neville, Kennedy, Kilbuck, Ohio, Reserve, Robinson, Wilkins, Fawn, Crescent, Versailles, Alenno, Pine, Springdale, Harmar.

ARMSTRONG COUNTY. Boroughs: Elderson, Kittanning, Queenstown. Townships: Manor, Perry, Red Bank, South Bend, South Buffalo.

BEAVER COUNTY. Boroughs: Beaver, Eastvale, New Galilee, East Rochester, Freedom, Hoebstown, Midland, Woodlawn. Townships: Borough, Harmony, Rochester, Harmony.

BEDFORD COUNTY. Boroughs: Bedford, Rainsburg, Schellsburg. Townships: Bedford, Broadtop, Colerain, Monroe, Southampton, Union, W. St. Clair, Harrison.

BERKS COUNTY. Birdsboro, Centreport, Shillington, Mohnton, Fleetwood Mt. Penn, Wyomissing. Townships: Alsace, Bern, Caernarvon, Cimar, Douglass, Richmond, Muhlenberg, North Heidelberg, Ontelaunee, Perry, Tilden, U. Bern, Washington.

BLAIR COUNTY. Boroughs: Duncanville. Townships: Blair, Freedom, Juniata.

BRADFORD COUNTY. Boroughs: Canton, Rome, Towanda. Townships: Canton, Columbia, South Creek, Troy, Warren, Wyalusing.

BUCKS COUNTY. Boroughs: Holmesville, Langhorne, Langhorne Manor, Richlandtown, Quakertown, Sellersville, Silverdale, Tullytown. Townships: Bridgeton, Milford, Northampton, Wrightstown.

BUTLER COUNTY. Boroughs: Bruin, Petrolia, Eau Claire, Harrisville, Millertown, Slippery Rock. Townships: Brady, Parker, Cranberry, Forward, Lancaster, Marion, Worth, Winfield.

CAMBERIA COUNTY. Boroughs: Barnesboro, Vintondale, Westmont, Brownstown, Cresson, Drisstown, Dale, Franklin, Portage, Wilmore, Scalp Level, Tunnel Hill. Townships: Allegheny, Cambria, Barr, Susquehanna, Black Lick, Jackson, Carroll, Stony Creek, L. Yoder, U. Yoder.

CAMERON COUNTY. Boroughs: Driftwood, Emporium. Townships: Gibson, Grove, Shippen, Portage, Lumber.

CARBON COUNTY. Boroughs: Beaver Meadow, E. Mauch Chunk, Mauch Chunk, E. Side, Weissport, Summit Hill. Townships: Lausanne, Penn Forest, E. Penn.

CENTRE COUNTY. Boroughs: Bellefonte, Philipsburg. Townships: Spring, Bonner, Pennside, Snow Shoe, College, Halfmoon, Harris, Taylor.

CHESTER COUNTY. Boroughs: Atalen, Hopewell, Elverson, Parkersburg, Spring City. Townships: West Sadsbury, West Caln, L. Oxford, U. Oxford, Franklin, W. Nantmeal, Honeybrook, Wallace, E. Vincent, Charlestown, E. Bradford, E. Caln, E. Goshen, E. Whiteland, Kennett, Pennsbury, W. Whiteland, Westtown.

CLARION COUNTY. Boroughs: Callensburg, Curllsville, New Bethlehem, St. Petersburg. Townships: Brady, Millcreek, Paint, Piney, Redbank.

CLEARFIELD COUNTY. Boroughs: Wallacetown, Brisbin, Ramey, Osceola, Chester Hill, Curwensville, New Washington, Irvona. Townships: Bradford, Brady, Pike, Ferguson, Knox, Graham, Morris, Greenwood, Burnside, Lawrence, Pine, Karthaus.

COLUMBIA COUNTY. Boroughs: Catawissa, Millville. Townships: Catawissa, Centre, Conyngham, Fishing Creek, Greenwood, Pine, Scott, Main, Montour, Sugarloaf, Orange.

CRAWFORD COUNTY. Boroughs: Conneaut Lake, Hattstown, Saegertown, Woodcock. Townships: Bloomfield, Cambridge, E. Mead, Fairfield, Greenwood, Randolph, Richmond, Woodcock, Steuben, Union, Vernon, Venango.

CUMBERLAND COUNTY. Boroughs: Camp Hill, Mt. Holly Springs, Shipensburg. Townships: Southampton, Frankford, L. Mifflin, U. Mifflin, Penn, N. Middleton, Shippensburg, Silver Springs.

DAUPHIN COUNTY. Boroughs: Berrysburg, Dauphin, Highspire, Lykens, Millersburg, Penbrook. Townships: Middle Paxton, Jackson, L. Swatara, L. Paxton, Williams.

DELAWARE COUNTY. Boroughs: Upland, Collingdale, Colwyn, Eddystone, Norwood, Ridley Park, Rutledge, Glenolden, Sharon Hill, Marcus Hook, Swarthmore, Morton, Media, Prospect Park. Townships: Aldan, Clifton Heights, Aston, Chester, Concord, Ridley, Haverford, Marple, Nether Providence, U. Providence, Middleton, Springfield, Newton, Tineum, U. Chichester.

ELK COUNTY. Boroughs: Johnsonburg. Townships: Benzinger, Fox, Jay, Ridgway, Spring Creek, Jones, Highland.

ERIE COUNTY. Boroughs: E. Springfield, Girard, Mill Village, Union City, Waterford, Wattsburg. Townships: Conneaut, Springfield, Fairview, Greene, Harbor Creek, Mill Creek, LaBoeuf, Union, McKean, Washington, Greenfield.

FAYETTE COUNTY. Boroughs: Dawson, Everson, Masontown, Smithfield. Townships: Nicholson, Saltlick, Washington.

FOREST COUNTY. Borough: Tionesta. Township: Tionesta.

FRANKLIN COUNTY. Boroughs: Greencastle, Orrstown. Townships: Green, Guilford.

FULTON COUNTY. Townships: Bethel, Belfast.

GREENE COUNTY. Boroughs: Clarksville, Greensboro, Jefferson, Mount Morris. Township: Wayne.

HUNTINGDON COUNTY. Boroughs: Birmingham, Marklesburg, Millcreek, Shade Gap. Townships: Franklin, Hopewell, Henderson, Juniata, Tell, Clay, Springfield.

INDIANA COUNTY. Boroughs: Cherrytree, Clymer. Townships: Banks, Blacklick, Buffington, Pine.

JEFFERSON COUNTY. Boroughs: Brockwayville, Brookville, Sykesville, Worthville. Township: Heath.

JUNIATA COUNTY. Boroughs: Patterson, Thompsontown. Townships: Beale, Fayette, Fermainaugh, Susquehanna, Turbett.

LACKAWANNA COUNTY. Boroughs: Dalton, Laphume, Waverly, Vandling, Jermyn, Mayfield, Moscow, Moosic. Townships: Clifton, N. Abington, Fell, Jefferson, Roaring Brooks, Lackawanna, Scott.

LANCASTER COUNTY. Boroughs: Adamstown, Denver, New Holland. Townships: Clay, Conoy, E. Cocalico, Eden, Manor, Pequea, Sadsbury, W. Donegal, W. Hempfield, U. Leacock.

LAWRENCE COUNTY. Boroughs: S. New Castle, Ellwood City, Volant. Townships: Neshannock, N. Beaver, Scott, Shenango, Taylor, Union, Wayne, Wilmington.

LEBANON COUNTY. Townships: W. Annville, N. Londonderry, W. Cornwall.

LEHIGH COUNTY. Boroughs: Coopersburg, S. Allentown, Emaus, Macungie, Slatington. Townships: S. Whitehall, Salisbury, Hanover, L. Milford, U. Milford, Heidelberg, Lynn.

LUZERNE COUNTY. Boroughs: Laffin, Courtdale, Exeter, Jeddo, Laurel Run, Warrior's Run, Miners Mills, Parsons, W. Hazleton, Conyngham, Nuangola. Townships: Bear Creek, Buck, Black Creek, Jackson, Kingston, Pringle, Wright.

LYCOMING COUNTY. Boroughs: Duboistown, S. Williamsport, Montgomery, Hughesville, Muncy, Picture Rocks. Townships: Lycoming, Anthony, Armstrong, Loyalsock, Woodward, Bastress, Brady, Washington, Brown, McHenry, Cummings, Pine, Cascade, Gamble, McIntyre, Lewis, Fairfield, Penn, Plunketts Creek, Shrewsbury, U. Fairfield, Eldred.

McKEAN COUNTY. Boroughs: Mt. Jewett, Port Allegheny. Townships: Ceres, Otto, Corydon, Hamilton, Hamlin.

MERCER COUNTY. Boroughs: Mercer, Grove City, Jackson Centre, New Lebanon, New Vernon, Stoneboro, Sheakleyville. Townships: Delaware, E. Lackawannock, Jefferson, Lackawannock, Liberty, Sandy Lake, Springfield, Sugar Grove, Worth.

MIFFLIN COUNTY. Borough: McVeytown. Township: Brown.

MONTGOMERY COUNTY. Boroughs: Ambler, Bridgeport, Hathboro, Hatfield, Jenkintown, Narberth, Royersford, Trappe. Townships: Plymouth, U. Merion, Springfield, U. Hanover, U. Salford, Whitpain.

MONTOUR COUNTY. Townships: Derry, Mayberry, Valley, W. Hemlock.

NORTHAMPTON COUNTY. Boroughs: Freemansburg, N. Catasauqua, Walnut Port, Chapman, Glendon, Stockerton, Tatamy, W. Easton, Wind Gap. Townships: Bethlehem, Hanover, Forks, Williams, Palmer.

NORTHUMBERLAND COUNTY. Boroughs: Marion Heights, Northumberland, Riverside. Townships: Delaware, U. Augusta, Zerbe.

PERRY COUNTY. Boroughs: Bloomfield, Liverpool. Townships: Carroll, Juniata.

PIKE COUNTY. Townships: Delaware, Dingman, Palmyra.

POTTER COUNTY. Boroughs: Austin, Coudersport, Galetton, Lewisville. Townships: Allegheny, Bingham, Hector, Harrison, Hebron, Keating, Portage, Sharon, Stewartstown, Sweden, Homer, Wharton, Roulette.

SCHUYLKILL COUNTY. Boroughs: Auburn, Girardville, Gordon, Landingville, New Philadelphia, Palo Alto, Pine Grove, Port Clinton, Ringtown, Middleport, Schuylkill Haven, Tremont. Townships: Barry, Branch, Cass, Foster, Butler, Kline, New Castle, W. Manheim, W. Norwegian, Pine Grove, Rahn, Rush, Schuylkill, Tremont, Washington, West Penn, Hegins.

SNYDER COUNTY. Borough: Selinsgrove. Township: Jackson.

SOMERSET COUNTY. Boroughs: Hcoversville, Wellersburg, New Baltimore, Salisbury, Somersfield, Somerset. Townships: Brothers Valley, Larimer, Ogle, Somerset.

SULLIVAN COUNTY. Boroughs: Eaglesmere, Forksville. Townships: Cherry, Davidson, Fox.

SUSQUEHANNA COUNTY. Boroughs: Friendsville, Dundaff, Hallstead, Hopbottom, Montrose, New Milford. Townships: Auburn, Brooklyn, Lathrop, Apolacoon, Chococout, Great Bend, Liberty, Harmony, Oakland, Herlick, Jackson.

TIOGA COUNTY. Boroughs: Covington, Elkland, Fall Brook, Mansfield, Tioga, Wellsboro. Townships: Brookfield, Chatham, Duncan, Nelson, Gaines, Liberty, Richmond, Morris, Rutland, Shippen, Tioga.

UNION COUNTY. Borough: Lewisburg. Townships: Lewis, Limestone, Union.

VENANGO COUNTY. Boroughs: Cooperstown, Utica, Polk, West End. Townships: Allegheny, French Creek, Pine Grove, President, Victory, Rockland, Sugar Creek, Cherry Tree, Oakland.

WARREN COUNTY. Boroughs: Columbus, Tidioute, Youngsville. Townships: Corydon, Deerfield, Eldred, Southwest, Farmington, Pine Grove, Spring Creek.

WASHINGTON COUNTY. Boroughs: Burgettstown, California, Coal Center, W. Brownsville, Houston, Centerville, Cokeburg, Elco, Roscoe, Ellsworth, Midway, W. Alexander. Townships: Smith, Canton, E. Pike Run, Hanover.

WAYNE COUNTY. Boroughs: Hawley, Starrucca. Townships: Preston, Texas.

WESTMORELAND COUNTY. Boroughs: E. Vandergrift, Hyde Park, New Alexandria, N. Irwin, S. Greensburg, S. W. Greensburg, Trafford, W. Newton. Townships: Bell, Cook, Franklin, Washington, L. Burrell.

WYOMING COUNTY. Borough: Factoryville. Townships: Mehoppenny, Northumberland, Noxen, Exeter.

YORK COUNTY. Boroughs: Dillsburg, Mt. Wolf, Glen Rock, Hellam, Jefferson, Manchester, New Salem, Seven Valley, Wellsville, W. York, Wintertown, Yoe, Windsor, Dallastown, York Haven. Townships: Carroll, Monaghan, Conewago, Dover, E. Hopewell, E. Manchester, Fairview, Heidtberg, Hellam, Jackson, Manchester, Monaghan, New Salem, Newberry, N. Cadorus, Peach Bottom, Penn, Spring Garden, Springfield, Warrington, W. Manheim, Windsor, York.

In addition to the list of fourth-class districts having Medical Inspection, we were advised of this procedure in the following third-class districts.

ALLEGHENY COUNTY. Braddock, North Braddock, Munhall.

BRADFORD COUNTY. Sayre.

CHESTER COUNTY. West Chester.

COLUMBIA COUNTY. Berwick, Bloom burg.

CRAWFORD COUNTY. Titusville, Meadville.

DAUPHIN COUNTY. Susquehanna.

DELAWARE COUNTY. Darby, Radnor.

ELK COUNTY. St. Marys, Ridgway.

FRANKLIN COUNTY. Chambersburg

INDIANA COUNTY. Indiana.

JEFFERSON COUNTY. Punxsutawney.

LANCASTER COUNTY. Columbia.

LACKAWANNA COUNTY. Old Forge, Olyphant, Carbondale.

LAWRENCE COUNTY. New Castle.

LUZERNE COUNTY. Duryea, Kingston, Newport, Pittston, Wilkes-Barre township.

LYCOMING COUNTY. Jersey Shore

MERCER COUNTY. South Sharon, Sharon.

MONTGOMERY COUNTY. Cheltenham, Norristown, L. Merion, Abington.

McKEAN COUNTY. Kane.

NORTHUMBERLAND COUNTY. Sunbury, Coal, Milton, Mt. Carmel.

SCHUYLKILL COUNTY. Minersville, Shenandoah.

WARREN COUNTY. Warren.
WASHINGTON COUNTY. Charleroi.
WESTMORELAND COUNTY. S. Huntingdon.
VENANGO COUNTY. Franklin.

TYPHOID FEVER IN ERIE.

On receipt of the morbidity report of the city of Erie for the third week in January, 1911, it was noted that 37 cases of typhoid fever had been reported during the week and on looking over the records for the preceding weeks of January it was noted that a total of 69 cases of this disease had been reported in the city during the first three weeks of January. This report prompted the writing of a letter to the Secretary of the Board of Health on the 24th of January reading as follows:

"Your morbidity report for the month of January shows 69 cases of typhoid fever. This is indeed a serious matter for a city of the size of Erie. We are writing to inquire whether you have located the cause of the outbreak and to learn what you are doing toward stamping out the infection. Permit us in this connection to call your attention to a few of the things the Department has found of great advantage in handling outbreaks of typhoid fever.

"In the first place, it is absolutely essential to have all physicians treating typhoid cases to report them to your Board in writing at the earliest possible moment the diagnosis is made, and any physician neglecting to report forthwith as required by the Act of May 14, 1903, should be prosecuted, and for a second offense should be heavily fined.

"As you know, the Act of May 14, requires your Board to placard every house in which typhoid fever is being treated. We have found it of great advantage in epidemic work to hand to the householder in every such premises at the time the placarding is done a circular, similar to the one which we enclose with this letter, outlining the details of concurrent disinfection that should be practiced by the nurse and attendant. The secret of preventing secondary cases in the household lies in attention to these details.

"The Health Officer, at the time he placards a house should be instructed to make a most careful sanitary inspection and note in writing every detail about the condition of the privy and cesspool, and he should report to your Board how the excreta are being disinfected and if efficient methods are not being practiced he should instruct the householder in proper methods for disinfecting such discharges and in safe methods for their ultimate disposal. Many times the health officials can with advantage furnish lime and chemicals to the poor for this purpose.

"In every case where the family is an indigent one and it is possible to secure permission, the patient should be transferred to a hospital if his condition justifies removal. Where removal of such case is impossible, intelligent nursing may often be advantageously given by someone in the employ of the local Board of Health.

"Warning placards should be posted at conspicuous places throughout the town, preferably on telegraph and telephone poles, urging citizens to boil every bit of water used for drinking purposes.

"If any public springs or wells still in use are believed to be polluted, warning signs should be posted, similar to the one which we are mailing you.

"A most important thing that is often overlooked is that of serving milk in the household. The housewife should be instructed to set out a container to receive the milk, and the dairyman, whether he be a retail man with a wagon or the next door neighbor, should be strictly enjoined to pour the milk into the container without touching it. Any milk bottles found on the premises should be kept there until disinfected by your Health Officer and their release authorized by the health officials.

"Meats, vegetables, etc., should not be handled by persons in the household with typhoid unless it is for the consumption in that house. The common practice of the good housewife handling meat at the rear end of the delivery wagon often carries the infection far beyond the original source.

"If the municipal supply of water is at fault immediate provision should be made for treatment of this supply by means of copper sulphate or hypochlorite of lime until such time as a suitable and permanent system of purification may be installed.

"We have found it best to try and prove the source of infection by making a careful census of all cases, using cards similar to the one which we enclose in which the customs and movements of every patient sickening are carefully traced as individuals, and by checking up the total number using certain foodstuffs, milk or water in common. By some such system you can determine very accurately the source of the infection and issue warning accordingly.

"If the Department can be of further service to you, we will be very glad to lend our aid."

Prior to its delivery, however, Dr. Wright, Secretary of the Board of Health, and Health Officer for the city of Erie, wrote the Department a letter under date of January 25th, which perhaps passed the Department's Communication in the mails; this letter reads as follows:

"I desire to call your attention to the typhoid record of this city since December 1, 1910. The number of cases in December having been thirty-one with two deaths and from January 1, 1911, to the present time, one hundred forty-one cases, with twenty deaths.

"Four analyses of the water, three at the request of this Department and one at the instance of a local newspaper, were made by Mr. James A. Evans, Chemist to the State Department of Agriculture, and have, in each instance, shown the presence of the colon bacillus. As the city of Erie has no official Bacteriologist, detailed efforts to isolate the bacillus typhosus have not been made by the Board of Health, but as the disease is general throughout every section of the city and repeated investigations of the milk supply have failed to trace it in any instance to that source, we believe that the water is the cause of the outbreak. In addition to this, analyses of the different local spring waters and samples of ice have also been made with negative results.

"The local Board of Health has repeatedly urged upon the people the absolute necessity of boiling all city water for drinking and other domestic purposes and have taken such other steps as appeared to be indicated, but to date do not seem to have accomplished much by their efforts.

"The members of our Board of Water Commissioners are appointed by the President Judge of the county, under a special act of legislature, and are in no way responsible to the local authorities. They insistently maintain that the water is not contaminated and they are in no way responsible for the outbreak.

"Have you any suggestions to offer as to the steps that may be taken by us to check this epidemic? Would you not consider it advisable for your Department to take this matter in hand, make a thorough survey of conditions existing here, and if necessary, assume full control of the situation?"

By direction of the Commissioner, Mr. Snow, Chief Engineer of the Department, and several assistant engineers, proceeded to Erie January 27th with instructions to make a complete sanitary survey for the purpose of determining the source of the infection and to take active measures toward sterilizing the water if a preliminary survey indicated that the infection reached the citizens through the public water supply.

The engineering corps almost immediately began sterilizing the public water supply. They too kept in frequent touch with the Department during the preliminary survey. These officers were joined by Miss O'Halloran and Miss Gillespie, the Department's Chief Visiting Nurse and Assistant, on the 5th of February and by the Chief Medical Inspector February 6th. Return visits were made by the Chief Medical Inspector on the 12th and 13th of February, 18th and 19th days of February and on the 5th and 6th days of March. During the earlier visits a great deal of the Chief Medical Inspector's time and that of Dr. Wright was spent in conference with the engineers in determining definitely that the major portion of the cases of typhoid fever received their infection from the public water supply and further, in studying the relation of the diarrheal diseases reported in December and early January, to the later cases of typhoid fever.

Much of the data gathered in these studies will be found fully set forth in the annual report for the Board of Health of Erie for 1911 and is again referred to here.

During the middle of December, or approximately between the 7th and the 17th, a tremendous outbreak of diarrhoea occurred. This outbreak of diarrhoea had been variously diagnosed by the physicians in the city and by householders, as "la grippe," of the abdominal type, "winter cholera" and ordinary dysentery. By interviewing a large number of representative physicians in the city, most of whom were engaged in general practice and who had had members of their own families afflicted, enough information was gathered to determine pretty definitely from their visiting lists, case notes and memories that a striking resemblance was maintained throughout each of these dysentery outbreaks, that the first explosive outbreak of dysentery occurred on or about the 12th of January to about the 22nd or 23rd and judging from the various physicians' extra work at this time and the number of families who ordinarily came under their care, from twenty to thirty thousand people must have developed some serious intestinal disturbance during the December outbreak. For a period of three weeks following this outbreak, or about the beginning of the third week of December until the middle of the second week in January comparatively a small number of new cases of dysentery occurred, some relapsing attacks were reported in those who had previously suffered from intestinal illness.

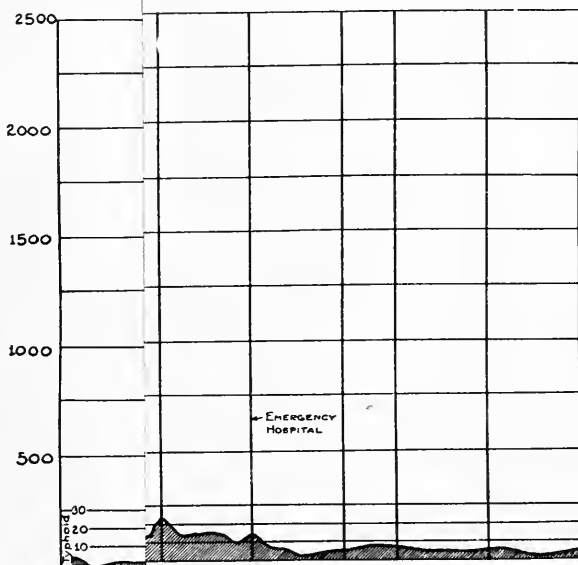
Somewhere about the middle of January, approximately the 12th to the 15th a second outbreak of dysentery occurred, similarly explosive in character in which perhaps ten thousand people sickened. In some instances members of families sickening in January had escaped intestinal disturbance in December. In other instances, individuals having the disease in December, again sickened in January.

The general character of the illness in each of these diarrheal outbreaks was so nearly similar in all persons interviewed that the vast majority of the cases may be described as having begun with a sudden diarrhoea preceded with no constitutional disturbance or with a disturbance so slight as to have been ignored in nearly all instances.

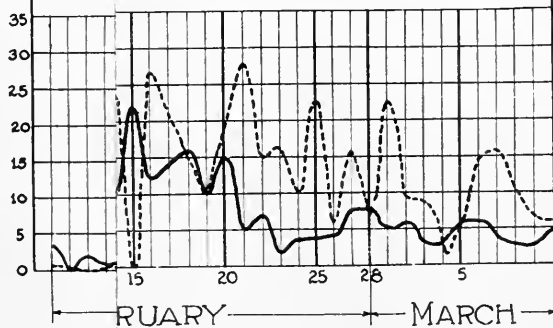
The first symptoms noted were usually severe griping pains in the abdomen followed in a few hours by frequent profuse watery stools, often offensive and accompanied by much flatus. In the severe types of diarrhoea, fever was noted. (We failed in our studies to find any well kept temperature records, covering the period of fever), several of the physicians reporting a temperature as high as 102 for a period of several days. Some of the more severe cases were reported to have had some fever for a period of a week or ten days. A considerable number of the severe cases passed blood streaked stools and some aged persons and several young children died from this illness, two cases occurring in one institution, the Home for Aged Soldiers.

ND 1911.

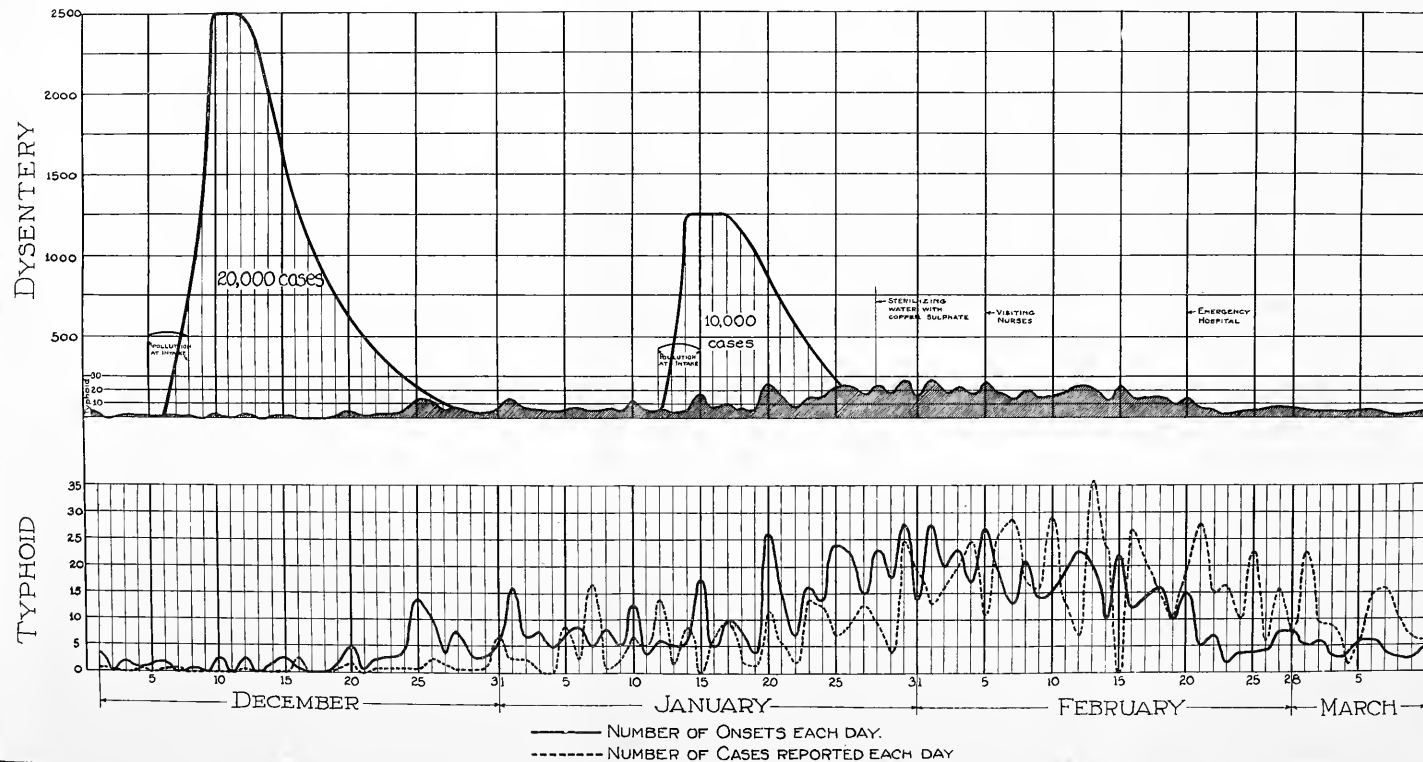
DYSENTERY



TYPHOID



EPIDEMICS OF DYSENTERY AND TYPHOID FEVER, ERIE, PENNA. 1910 AND 1911.
 PLOTTED TO SHOW RELATION OF DYSENTERY TO
 POLLUTED WATER AND TO TYPHOID FEVER.



Whilst it is perhaps true that 20,000 or 30,000 people sickened with dysentery in December and 10,000 or 15,000 in January, the total number could only be approximated, as this disease was not reportable and no exact data was at hand. An estimate of 30,000 however, is well within the judgment of the leading practitioners of Erie.

In the dysentery curve plotted on the accompanying illustration, it will be of interest to note that the curve incidence follows by a few days only the period of time that Mr. Oberholtzer, the government engineer, has approximated from a study of the currents and winds that sewage fields may have in the vicinity of the city's water intake and corresponds exactly with the citizens' report of the use of turbid water. This relation to possible pollution of the water is well borne out in both the January and December outbreaks of diarrhoea.

Features of this plotting that are equally interesting are the typhoid onsets from the 24th of December to the 10th of January and 1st days of February and the further onsets from the 19th of January, running through February and well into March. It would appear from these curves that with the December pollution of the water supply, enormous numbers of the typho-colon group of organisms were consumed by Erie citizens and that all of those sickening with diarrhoea in early December and with typhoid fever in late December and early January, were infected from the same sewage polluted water, the diarrheal disease coming promptly after ingestion of this water, the typhoid fever occurring a fortnight or longer after its ingestion and if it is true, as seems altogether probable, that the winds and currents carried polluted sewage to the city's intake, then the sewage polluted water ingested in January contained a much higher degree of pollution from typhoid sewage than in December owing to the greater pollution of the harbor waters by excreta from patients sickening in December and early January, hence the higher percentage of people who drank polluted water in January sickening with typhoid fever. Certain small peaks of the curve may be accounted for as onsets of secondary cases and as onsets of diarrhoea in cases later developing genuine typhoid fever.

The plotting also serves to illustrate the divergence of dates of onset from the curve showing the dates of reporting. Because of the experience of many of Erie's physicians in handling the outbreaks of diarrhoea in December and January, they may have been slower than usual to report typhoid fever, believing that this intestinal disturbance would clear up within a week, as had been their experience in the outbreaks of "intestinal la grippe." If this be true, it would account in a measure for the delays occurring in the reporting.

Many of the cases of typhoid fever were not reported until twenty or thirty days after the actual onset of the illness. It will be noted

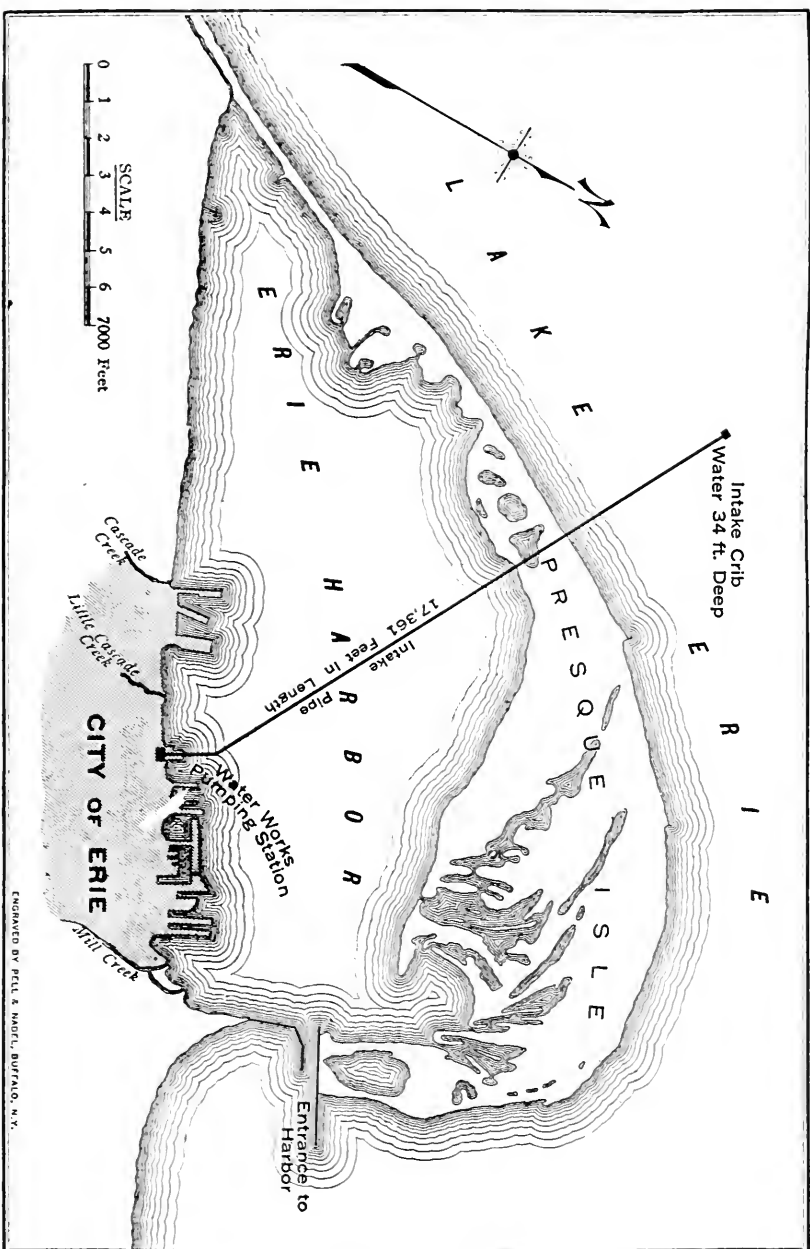
then, that the plotting of dates of onset would show a constant and correct relation to the dates of pollution of the water supply and a more exact relation than would the date of the physician's report. It would seem from a study of this plotting and granted that the infections most likely took place within three weeks after the gross pollution of the water supply in January, that the maximum number of cases had already sickened when the Department began active measures for purifying the water and that probably the greatest menace at that time was from the enormous number of cases being treated in their homes with the chance of secondary infection and from the pollution of the incoming water from the pipes and dead ends and from the multiplication of bacteria in pipes seldomly used at house taps, hence it was to be expected that with the engineer's sterilization of the water with copper sulphate on the 28th of January and the bleeding of house taps, an operation covering several days, that within a period of three weeks the epidemic should decline. This is well borne out in the plotting by dates of onset in which you will note that in a period of three weeks subsequent to sterilization practically the entire harvest of the outbreak was reaped. Subsequent cases are nearly all accounted for as secondary infections in households where some one had already sickened.

So far as the Medical Officers of the Department had to do with the outbreak, it was limited largely to the securing of prompt reports of all cases, the establishment of rigid regulations in the homes for the disposal of all excreta and the supplying to every family unable to secure service for themselves, proper nursing and proper food and to the rendering assistance in the opening and operating of an emergency hospital on the 20th of February; the abatement of nuisances prejudicial to health and the protecting of all food supplies.

It was noted early in the epidemic that careful bed-side instruction was demanded. With this object in view, Miss O'Halloran and Miss Gillespie, the visiting nurses for the Department, were dispatched to Erie and at the request of the local Board of Health, Miss O'Halloran, assisted by Miss Gillespie, directed the organization of a corps of visiting nurses and later, in addition to directing this work, opened, organized and superintended the work of the emergency hospital and much sociological work. A full report of her activities accompanies this report.

The Department was rather fortunately situated in its relations with the Board of Health of Erie, as the Health Officer of the Board is the Department's Medical Inspector for the county and for the most part was the only medical representative of the Department in Erie and the bulk of the work was done by him in person, the Chief Medical Inspector making two day visits from time to time.

Map Showing Outline of Presque Isle Bay and Peninsula, Showing their Relations to the Mainland.



ENGRAVED BY FELL & NADOL, BUFFALO, N. Y.

Chart Showing Number of Cases of Typhoid Fever per 100,000 Inhabitants, from 1901 to 1911, Inclusive.

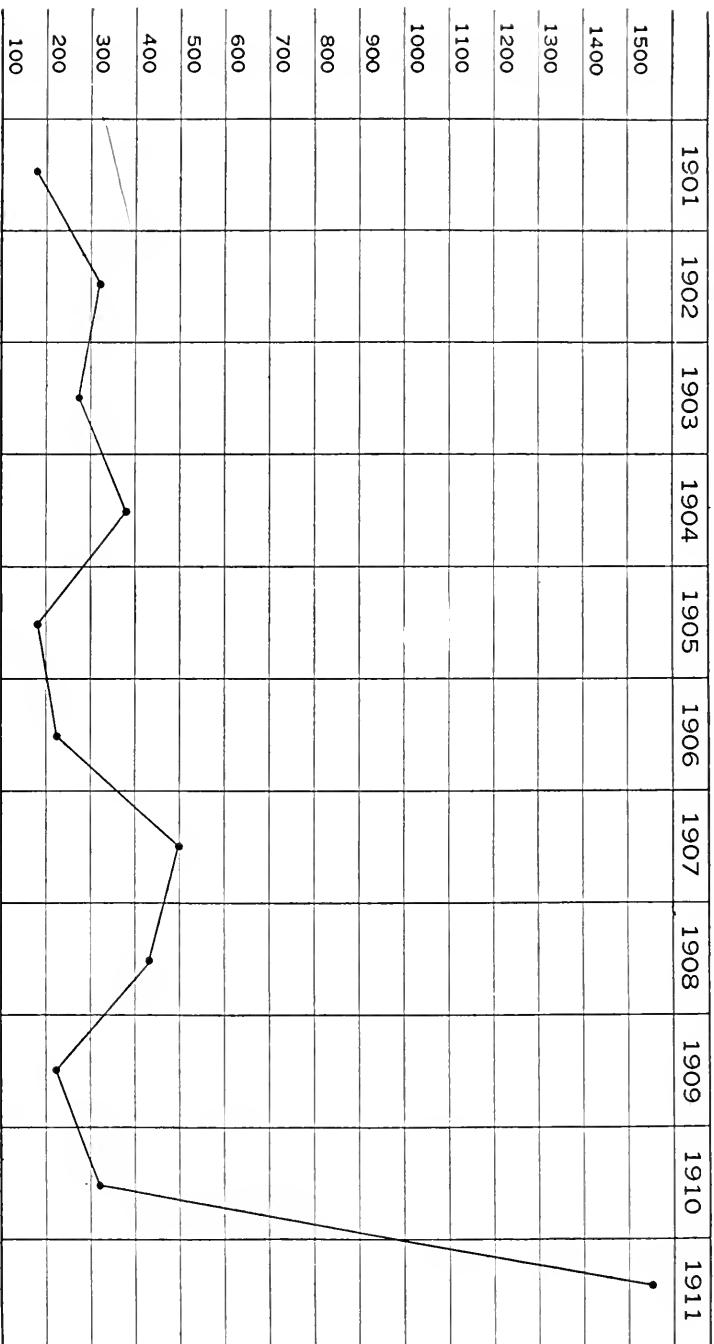
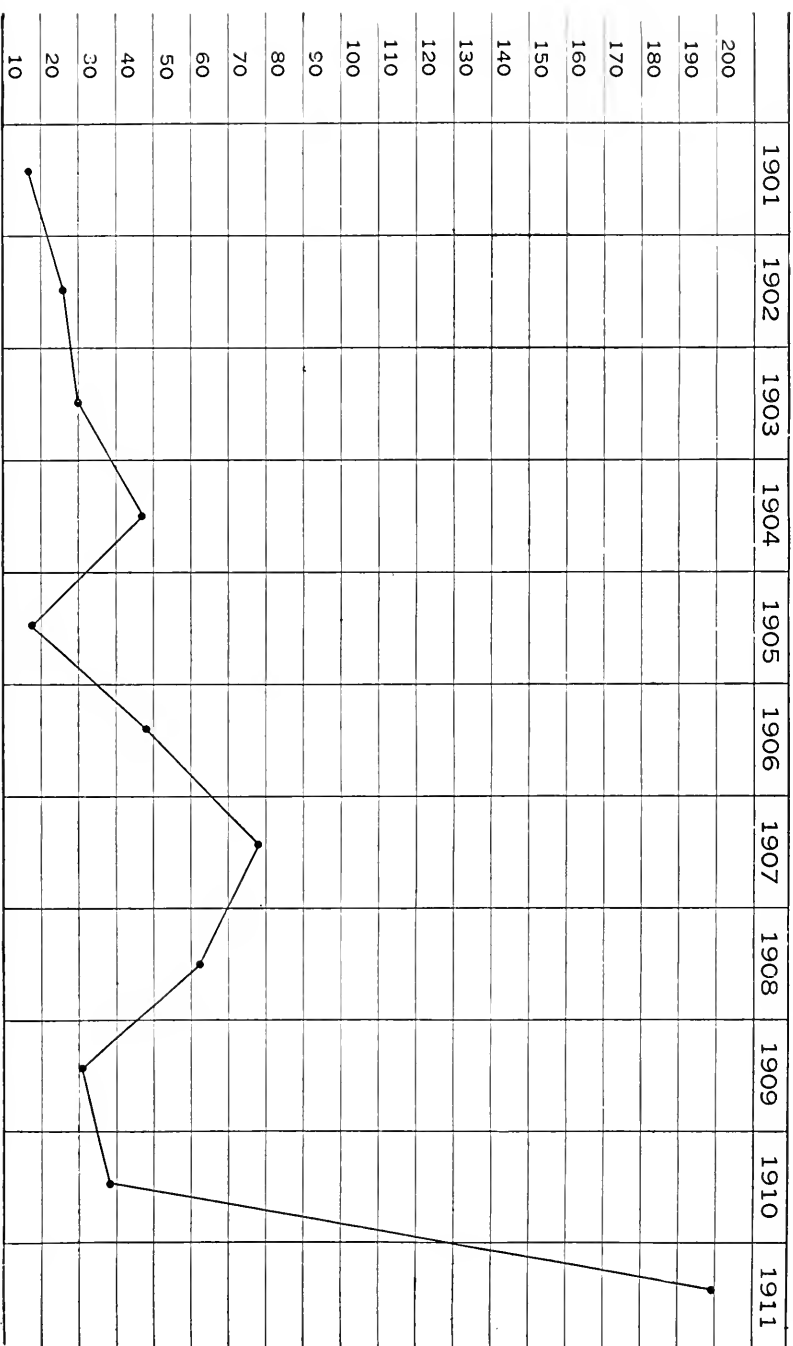


Chart Showing Number of Deaths from Typhoid Fever per 100,000 Inhabitants, from 1901 to 1911, Inclusive.



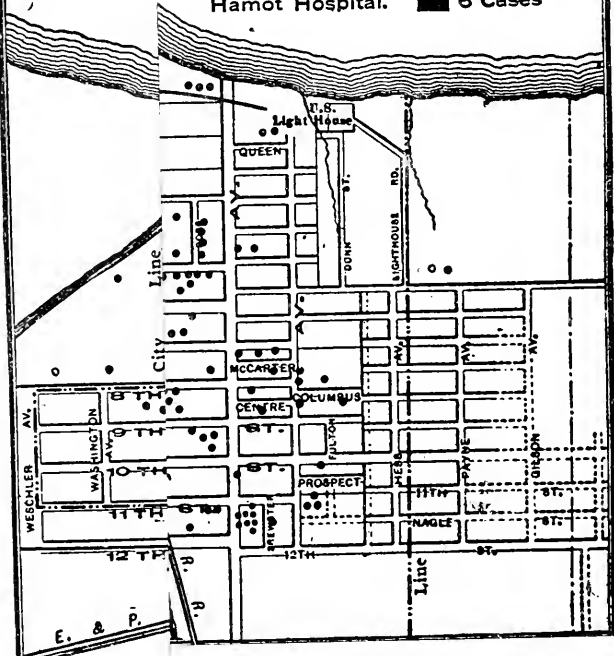
CIT

K E E R I E

NOTE:

St. Vincents Hospital. ■ 11 Cases

Hamot Hospital. ■ 6 Cases



CITY OF ERIE

PENNA.

Map showing location of cases of Typhoid Fever
occurring during the year 1911

CHANNEL

LAKE ERIE

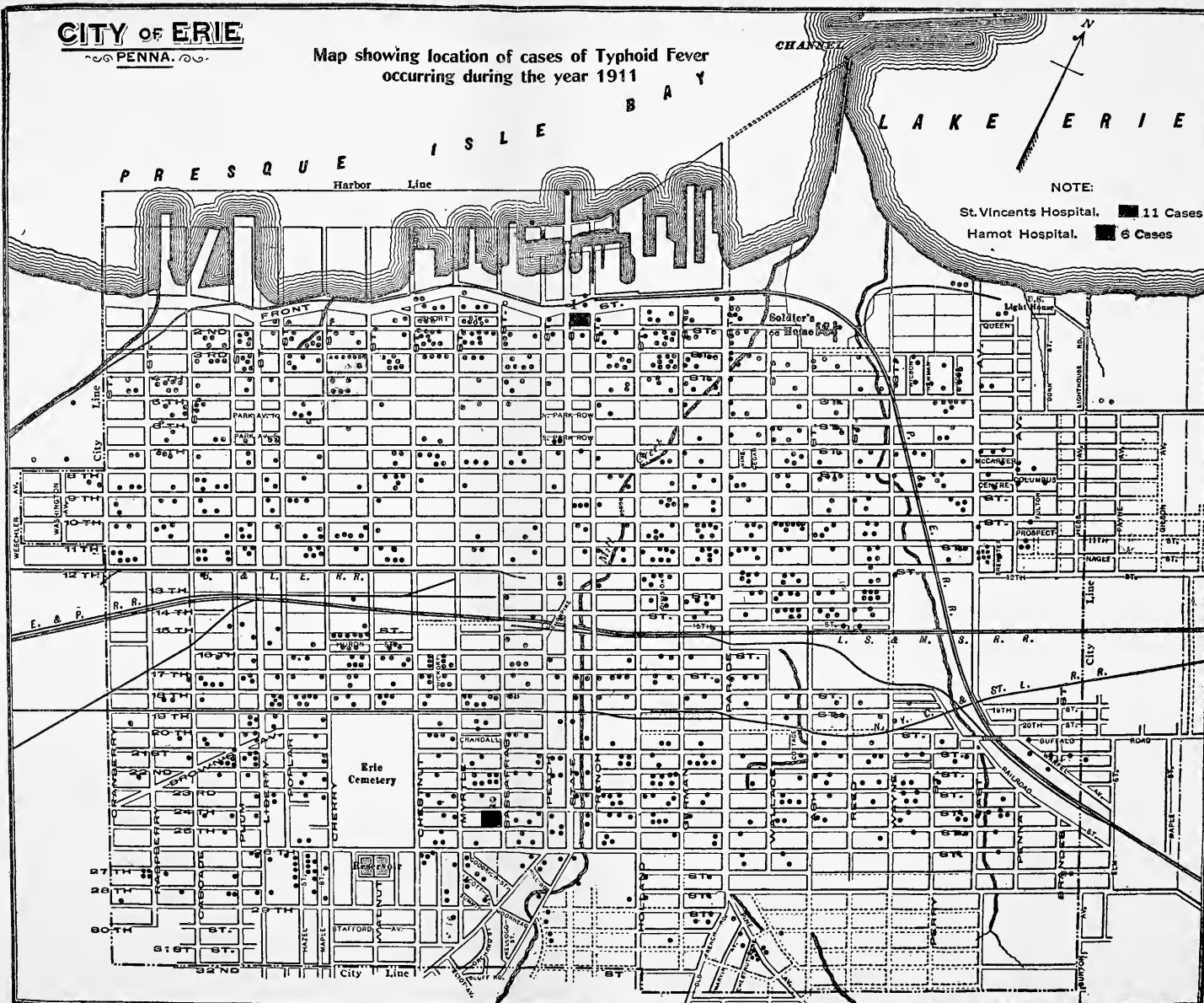
PRESQUE

Harbor Line

NOTE:

St. Vincents Hospital, 11 Cases

Hamot Hospital, 6 Cases



A few notes from the records of the emergency hospital taken from the annual report of the Board of Health are appended. The cuts, with the exception of the plotted curves referred to in the text used to illustrate this report, were loaned by the Department of Health of Erie.

The statistical record of the hospital was as follows: Open 55 calendar days, representing a total of 3,159 days of hospital treatment, during which time 123 patients were admitted, 94 of whom were discharged cured, 7 as convalescent, 7 removed to other institutions when the hospital was permanently closed on April 15, and 15 died. Seventy-eight patients were males and 45 females, their ages ranging in the following order: Five to 10 years, 7; 10 to 20 years, 46; 20 to 30 years, 40; 30 to 40 years, 12; 40 to 50 years, 12; 50 to 60 years, 4; 60 to 70 years, 2. Of the 15 deaths, 4 were between 10 and 20 years; 8 between 20 and 30; 1 between 30 and 40 years; 1 between 40 and 50 years, and 1 between 50 and 60 years. Forty-nine complications were observed in these patients, occurring as follows: Hemorrhage, 21; perforations, 9; acute bronchitis, 4; pneumonia, 3; multiple abscesses, 3; meningitis, erysipelas, post-typhoid insanity, otitis media, hemothorax and tuberculosis, puerperal hemorrhage, cystitis, pregnancy and broncho-pneumonia, 1 each. Complications were noted in all of the deaths, such being perforation, 6; pneumonia, 2; heart disease, 2; hemorrhage, myocarditis, cerebral meningitis, hemothorax and pulmonary tuberculosis and erysipelas, one each.

The following summary of the total number of cases, occurring in the city, also presents many interesting features: 1,037, of which 126 were fatal, were reported from December 1, 1910, to May 31, 1911, inclusive; 582 were males and 455 females, fatal terminations occurring in 78 males and 48 female cases.

Ages of Cases and Deaths by Age Periods.

	Cases. Deaths.	
Under 1 year,	3	.....
1 to 5 years,	25	2
5 to 10 years,	109	3
10 to 20 years,	328	31
20 to 30 years,	93	37
30 to 40 years,	143	20
40 to 50 years,	80	16
50 to 60 years,	29	11
60 to 70 years,	14	4
70 and over,	3	2
Totals,	1,037	126

Of the total deaths, 120 presented complications, among them being intestinal hemorrhage, 33; true pneumonia, 17; perforation of bowels, 15; myocarditis, 12; pulmonary tuberculosis, 7; peritonitis, 4; pulmonary congestion, nephritis, broncho-pneumonia, meningitis,

3 each; cerebral hemorrhage, otitis media, acute delation of heart, 2 each; edema of lungs, puerperal septicemia, cholecystitis, parotiditis, general septicemia, abortion, hematuria, hemathorax, erysipelas, phlebitis, multiple abscesses and noma, each.

An unsuccessful attempt was made to secure a complete list of complications in non-fatal cases, but satisfactory reports of such could be obtained in only 110 instances, records not having been kept in cases occurring outside of hospital practice.

Of these, intestinal hemorrhage was noted in 48 cases, pneumonia, 17; abscesses, 13; phlebitis, 5; meningitis, 4; mastoiditis, otitis media and cystitis, 3 each; nephritis, post-partum hemorrhage, cholecystitis and neuritis, 2 each and cerebral hemorrhage, pyemia, perforation of the bowel, cellulitis, abortion and aphonia, 1 each. In addition to these I am informed by local ear specialists, that many cases of mastoid and middle ear trouble were treated by them during the year in patients who had previously suffered from typhoid fever during this period.

Three hundred and twenty-eight cases were treated in hospitals with 61 deaths and 652 at home, with 55 deaths. It is obvious that no comparison can be drawn between the deaths in home and hospital practice, hospital cases representing by far the more aggravated types of the disease, as illustrated by the patients treated at the emergency hospital among which 49 complications were observed, or approximately 40 per cent. of the whole number.

A great deal of discussion arose as to the possible source of the epidemic. A full analysis of all possible sources will be found in the report of the Chief Engineer and need not be repeated here. It is sufficient to say that a complete analysis was made of every patient. the person making the canvass securing answers to all questions outlined on the census card printed elsewhere in the report of the Medical Division. Milk, vegetables, fruits were readily ruled out and we were far from the fly season, this question gave us no trouble.

In order to be perfectly sure that milk could be definitely ruled out as the source of the infection a study was made of every farm producing milk that eventually was sold in the city of Erie, it just so happened that the Department's Health Officers in rural districts were about to begin their spring inspection of dairy farms. In order that we might get a quick report from all of these farms a list of the producers whose milk reached Erie was secured from the health authorities and a letter forwarded to each Health Officer, giving him special instructions, a little more rigid than usual, together with a list of the milk producers in his district, asking that special reports of each farm be forwarded promptly. The letter to the Health Officers reads as follows:

"As you know, the city of Erie is having a serious epidemic of Typhoid Fever. We are particularly anxious to get a prompt and separate report of conditions on each farm where milk is produced that reaches this city. While making the present dairy inspection we would like you to make your inquiry with even greater care than usual concerning the possible existence of any fever on these premises during the last five or six months. We are enclosing a list of the dairies in your district whose product reaches Erie, as soon as you have reached all of them without going out of your usual routes, send us back this slip with a positive or negative answer in each instance and where you have found any evidence of fever a note as to the time and as to whether or not it was reported to you in the usual way, stating also if the Department's regulations had been established."

Out of the 489 dairies thus inspected we failed to find a single instance in which typhoid fever was present within a period of six months.

The work performed by the nurses, under the direction of Miss O'Halloran and Miss Gillespie have been summarized by Miss O'Halloran and is appended herewith.

It was very gratifying to the Department at the conclusion of the epidemic to receive communications from the Board of Health and from City Councils showing their appreciation and satisfaction of the work done by the Department's representatives. Under date of the 19th day of May, a communication was received from the President of the Board of Health reading as follows:

"Erie, Pa., May 19, 1911.

Dr. Samuel G. Dixon,
Commissioner of Health,
Harrisburg, Pa.

Dear Doctor: The Board of Health of the city of Erie, desires to take this opportunity of acknowledging the promptness with which you responded to its request for assistance during the recent typhoid fever epidemic.

The haste with which you despatched your able body of assistants, under the direction of Chief Engineer Snow and Chief Medical Inspector Royer, and the thorough manner in which the work was begun by them was an inspiration to our Board and to our citizens, and the efficient manner in which their duties were carried on and completed was most commendable.

The arrival at the same time of the Misses O'Halloran and Gillespie, the rapidity with which they organized the nursing force, who so competently cared for patients at their homes until hospital facilities could be provided, the manner in which they assumed charge of the Emergency Hospital and carried on its detailed work, have been sources of the greatest gratification to our whole community. That the outbreak was so promptly checked we attribute largely to the efforts of your Department.

Again thanking you for the courtesies extended, we have the honor to remain,

Very respectfully yours,

The Board of Health,
By D. V. Reinoehl, President.

The resolutions from Councils were forwarded to the Department the latter part of May and published in the Erie papers on the 30th of May and read as follows:

"Whereas, a deadly epidemic of typhoid fever ravaged this city during the months of December, 1910, January, February, March and April, 1911, jeopardizing hundred of lives and causing many deaths and great suffering and sorrow, in a large number of the homes of our citizens, and

"Whereas, with your prompt assistance and the invaluable services of the employees of the State Health Department, we were able to check this dread epidemic, in the most satisfactory manner, therefore, be it

"Resolved, That the select and common councils, representing the people of Erie, hereby extend their heart-felt thanks and sincere appreciation for the splendid work accomplished by you and your excellent department."

REPORT OF MISS ALICE O'HALLORAN, CHIEF NURSE, ON TYPHOID FEVER, AT ERIE, PA.

Pursuant to instructions received from the Chief Medical Inspector on February 4th, 1911, I proceeded to Erie on account of a typhoid fever epidemic in that city.

With Miss Gillespie, I arrived in Erie on February 5th, and was met by Dr. J. W. Wright, County Medical Inspector and local Health Officer, who gave me a general idea of existing conditions, two hundred and forty cases having been reported during the month of January. On this date (February 5th), eleven cases were reported. Miss Gillespie and myself visited all of these cases and our inspections showed the patients to be desperately ill and the home conditions such that it was evident a corps of visiting nurses would be necessary to relieve these conditions and to prevent the spread of infection. The eleven cases visited were apparently of primary origin, one case occurring in an Asylum (Home for the Friendless).

Reviewing the work of our inspections with Dr. Wright and the matter being taken up by him with the local Board of Health, it was decided to engage nurses to visit the homes of all patients, the expense of these nurses to be borne by the local Board of Health. Accordingly I was given authority to engage six nurses and start them at work immediately.

DISTRICT NURSING ORGANIZATION.

From the City Engineer I received blue prints of the plan of the city. The city was divided into districts, one or two nurses being assigned to each district. The nurses were not familiar with district nursing, consequently it required that each nurse be instructed as to her duties, which consisted in a plan of inspection of all premises, particular inquiry being made as to the probable source of infection of each case, with special report of any existing nuisance on the premises. Wherever a care-taker could be found for the patient she was taught how to give cleansing baths and sponge baths, and was given a practical demonstration in bed making and in the disinfection of bedding and discharges. The visiting nurse, in the presence of the caretaker put bedding and personal clothing into a boiler with cold water, gradually bringing the temperature up to boiling point and keeping it there for thirty minutes, after which they were washed. So, too, with the discharges; in the presence of the care-taker they were thoroughly stirred to break up formed masses and the whole was covered with chloride of lime and allowed to stand thirty minutes before emptying. The dishes are boiled in the presence of this care-

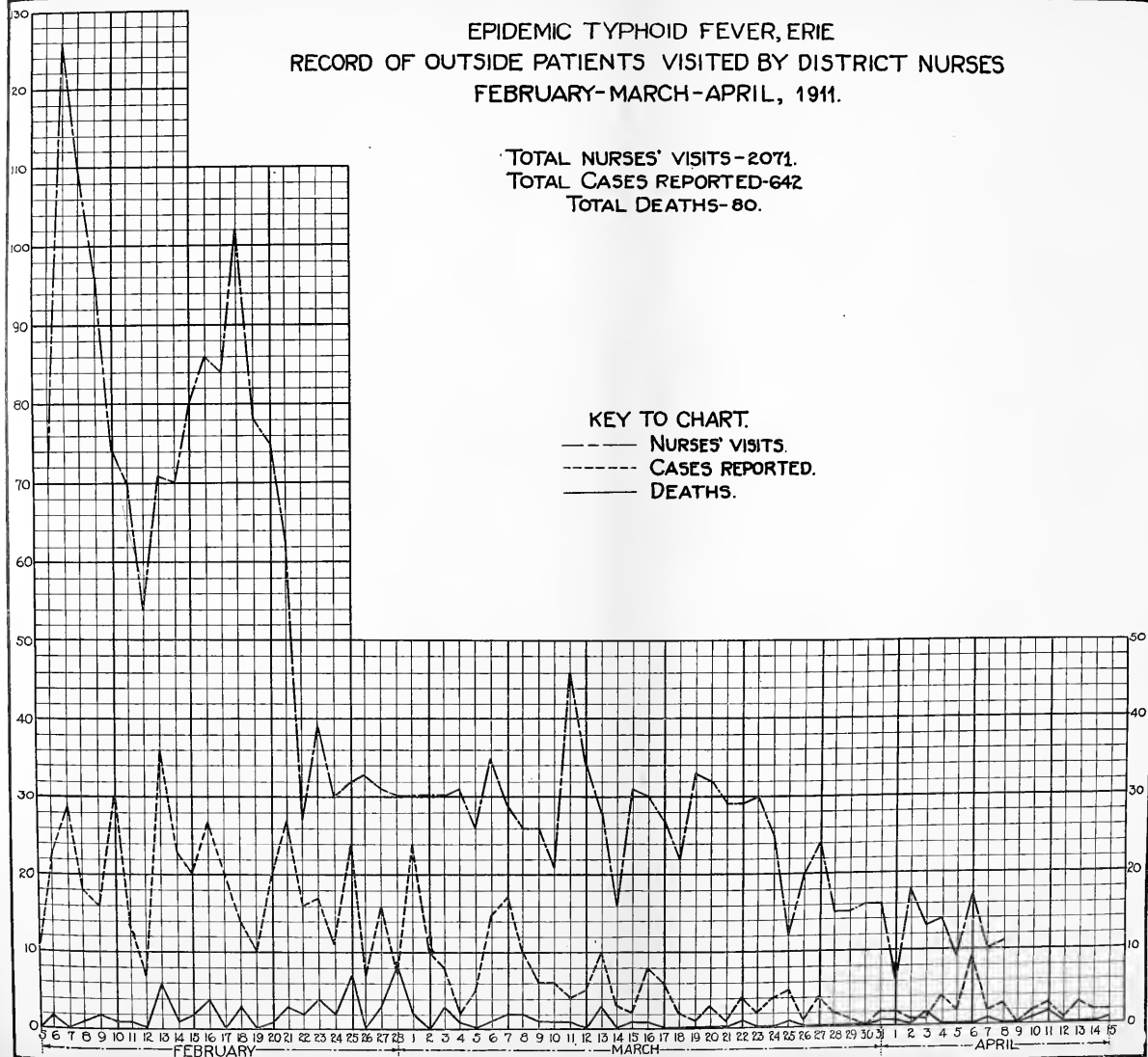


EPIDEMIC TYPHOID FEVER, ERIE
 RECORD OF OUTSIDE PATIENTS VISITED BY DISTRICT NURSES
 FEBRUARY-MARCH-APRIL, 1911.

TOTAL NURSES' VISITS-2071.
 TOTAL CASES REPORTED-642
 TOTAL DEATHS-80.

KEY TO CHART.

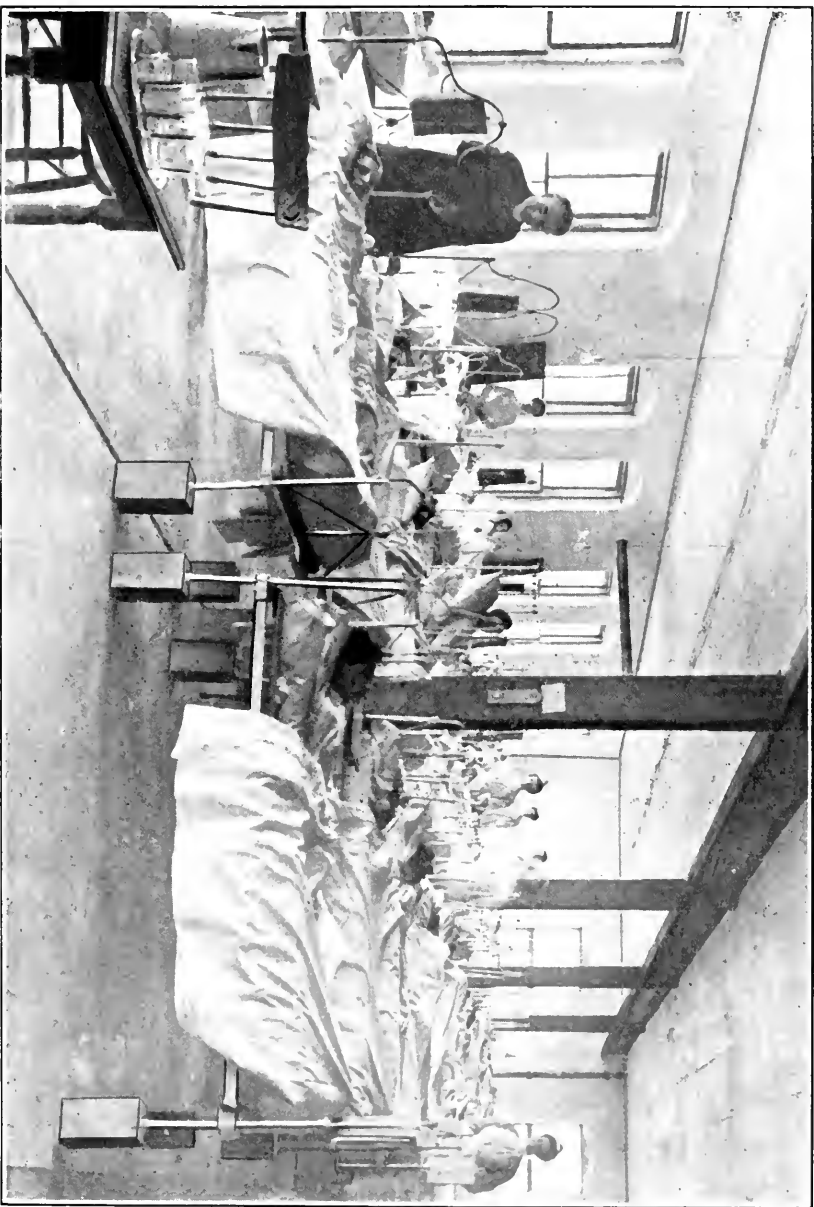
----- NURSES' VISITS.
 ----- CASES REPORTED.
 ----- DEATHS.



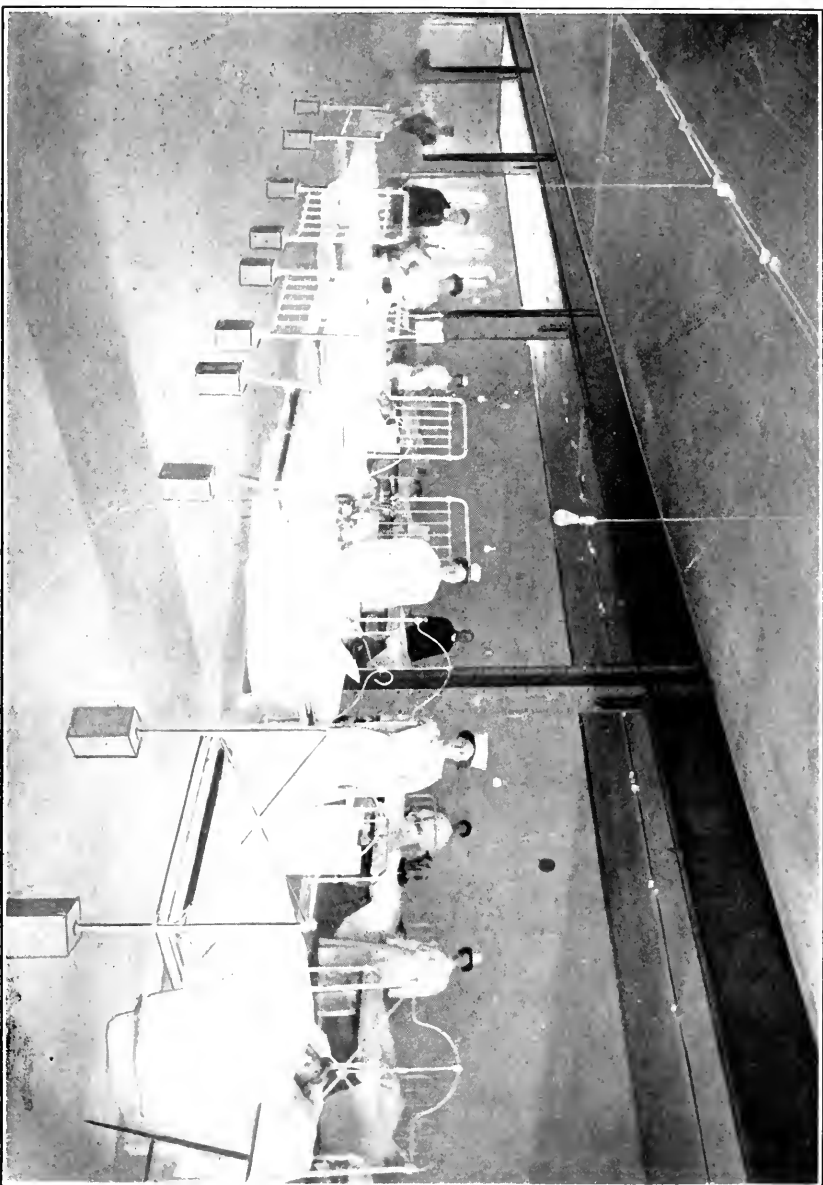


The Mayer Warehouse in Erie.

The third floor of this building was donated by the owner, Mr. Henry Mayer, for use as an Emergency Hospital, and the necessary installations (elevator, heat, water, etc.) were made by him.



The Mayer Emergency Hospital at Erie. A Section of the Ward for Men.



The Mayer Emergency Hospital at Erie. A Section of the Ward for Women and Children.

taker and in every way teaching was given in the form of object lessons. It frequently happened that the patient was a boarder and one of many occupying the same room and even at times occupying the same bed, one sleeping in it by day, another at night; or a mother the patient with one or more small children, none capable of rendering assistance. These and like conditions, as well as the state of the patient, the nurse was instructed to report twice daily to the office, or if on her rounds she met a condition requiring immediate attention to telephone her request to the office. Cases of destitution received immediate and particular attention.

These instructions the nurses carried out faithfully. Return visits were made once or twice daily, depending on the patient's condition. Each case reported was visited at least once, patients having trained or good domestic nurses not requiring a second visit except by request. When death occurred in a family the district nurse remained at the house to care for the children until after the funeral.

The following chart shows the number of cases reported during our stay—from February 5th to April 15th.

EMERGENCY HOSPITAL.

The large number of cases developing each day with the local hospitals filled far beyond their capacity—having patients in the corridors on couches up to the doors of entrance—together with a complete survey of the outlook by the Chief Medical Inspector, Dr. B. Franklin Royer, accompanied by Dr. J. W. Wright, convinced the local authorities of the necessity of having an emergency hospital. Accordingly on February 20th the third floor of the Mayer Warehouse consisting of two large rooms, was donated for this purpose; the owner, Henry Mayer, a philanthropic gentleman, responding quickly in the equipping of these rooms, installing heat, light, water, elevator, etc., giving the free use of this floor as an emergency hospital, for the city of Erie. The rooms were divided—one side for men holding forty-nine beds, the other side for women and children containing forty-one beds. A portion of the end of the third floor was used for laundry purposes, the clothing being disinfected and boiled and then sent to a steam laundry.

In organizing this work, I was given permission to purchase the necessary supplies, the problem of getting the beds being the most difficult. By the evening of February 20th, twenty-one beds had been installed and the hospital equipped with the necessary supplies, with six nurses on duty, four by day and two by night, this number being increased according to the number of admissions to the hospital. The bed-steads were rented from a local firm at one dollar per month, the agreement being to supply twenty-five beds per day until we had as many as were needed. The completed hospital corps consisted of

nineteen graduate nurses, two domestic nurses, four orderlies and two laundresses. The city Councils at this time appropriated \$2,000 for this work and some time later the water Commissioners appropriated \$10,000.

The physicians of the city had the privilege of attending any patients sent to the hospital or of turning them over to the hospital staff. This staff consisted of four of the physicians of the city of Erie, appointed by the Board of Health, serving without remuneration—Drs. J. Burkett Howe, Harrison Dunn, Chester H. McCallum and H. J. Morehead. Each patient after admission to the hospital had a widal test made by one of the staff physicians.

On April 14th, the date fixed for closing the hospital, the five remaining patients were transferred to the local hospitals, two to the Hamot and three to St. Vincent's. The greatest number of patients in Emergency hospital at one time was ninety, the total number of patients admitted to the hospital being one hundred and twenty-three.

The accompanying chart shows the number of patients under treatment in Emergency Hospital.

All expenses incurred in maintaining and running the hospital were met weekly by the Board of Health, the salaries alone amounting to over \$600.00.

The good citizens of Erie aided materially in the work of the Emergency Hospital by donating quantities of orange juice, broth, and other foodstuffs. The sum of two hundred and fifty-six dollars was donated by them to purchase necessary supplies for patients sick in their homes, those unable to be removed to any hospital. This money was used in buying sick room accessories, disinfectants, bed and body linen. Of the two hundred fifty-six dollars collected but one hundred dollars was used in the purchase of supplies. The following is a list of those contributing to this fund:

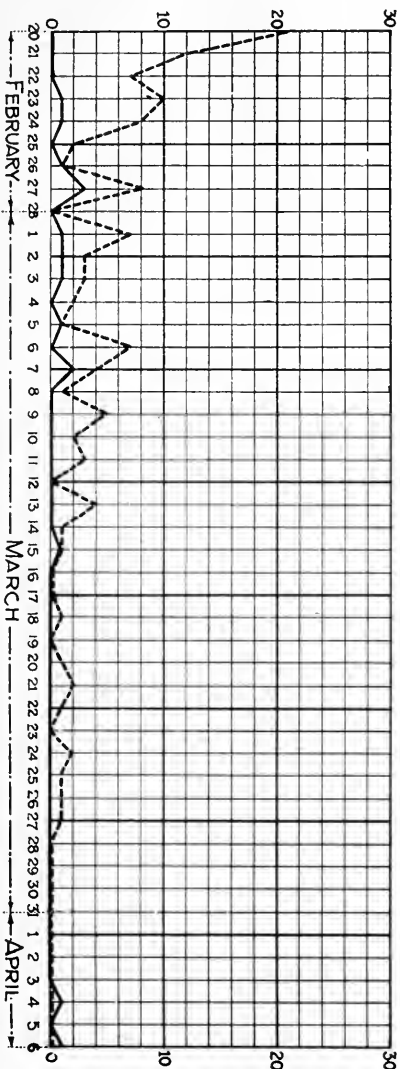
Schlaudecker Bros.,	\$50 00
Erie County Electric Co.,	25 00
R. H. Potter,	20 00
E. G. Germer,	20 00
Frank Connell,	20 00
Dr. Otto Behrend,	20 00
F. M. Wallace,	20 00
William Spencer,	20 00
Harry Ashby,	20 00
Mrs. B. Whitman,	10 00
T. M. Hemphill,	10 00
P. Minnig Co.,	5 00
A friend,	5 00
A friend,	5 00
A friend,	5 00
David Reese,	1 00
Total,	<hr/> \$256 00

RECORD OF ADMISSIONS AND DEATHS AT EMERGENCY HOSPITAL, EPIDEMIC TYPHOID FEVER, ERIE, ERIE CO. PENNSYLVANIA.

KEY
----- ADMISSIONS
———— DEATHS

TOTAL ADMISSIONS TO HOSPITAL-123.

TOTAL DEATHS-15.



COURTESY TO NURSES.

Mrs. George Metcalfe placed at the disposal of the nurses the use of an automobile which they were free to use for four weeks in making their visits or in carrying supplies to the patients. When the hospital was about to close Mrs. Charles E. Strong, one of Erie's good citizens, felt that in some way she would like to give the nurses some recreation, accordingly she gave two dinners, one to the day nurses and one to the night nurses.

During the time the Emergency Hospital was open the local hospitals received but few cases in order that they might reduce their numbers and perform their usual functions. When they were down to normal capacity the Board of Health decided to close the Emergency hospital, very few cases being reported at that time. The building was then gotten ready to remove all effects—the bed-steads were cleaned, disinfected and returned to the dealer. The mattresses and pillows were burned. The linen was fumigated and washed. The rooms were fumigated, cleaned and turned over to the owner.

TYPHOID FEVER (ERIE.)

Cases Investigated by District Nurses Classified by Age and Sex.

Age.	Male.	Female.
Less than 1 year,	1	0
1 to 2 years,	3	3
2 to 3 years,	3	2
3 to 4 years,	1	1
4 to 5 years,	2	2
5 to 9 years,	16	18
10 to 14 years,	47	33
15 to 19 years,	43	38
20 to 24 years,	34	32
25 to 29 years,	31	18
30 to 34 years,	22	14
35 to 39 years,	17	7
40 to 44 years,	14	6
45 to 49 years,	8	9
50 to 54 years,	8	4
55 to 59 years,	2	2
60 to 64 years,	5	3
65 years and over,	0	2
Not stated,	91	93
	347	287 or Total 634 cases.

TYPHOID FEVER (ERIE.)

	Male.	Female.	Total.
Number of cases nursed in hospital,	76	54	130
Number of cases nursed at home,	271	233	504
			634

TYPHOID FEVER CASES INVESTIGATED BY NURSE (ERIE.)

Classified to Show Number Using Boiled Water.

	Male.	Female.	Total.
Number using boiled water,	247	208	455
Number not using boiled water,	100	79	179
			634

Classified to Show Use of Disinfectants.

	Male.	Female.	Total.
Number using disinfectants,	251	214	465
Number not using disinfectants,	96	73	169
.....	.....	.....	634

INSPECTION AT WILSON COLLEGE, CHAMBERSBURG, ON ACCOUNT OF SUSPECTED SCARLET FEVER.

Pursuant to instructions of January 18th, I proceeded to Chambersburg and examined with Dr. W. F. Skinner one of the students in Wilson College having an eruptive skin lesion believed by the authorities to resemble in many respects the mild scarlet fever, known to be prevalent in this city.

There is practically no history of illness, the young woman denying even a gastric disturbance and the trained nurse's records show that at no time since the eruption appeared has there been a rise of temperature above normal. A careful examination of the skin in all parts of her body showed a rapidly fading erythema, leaving behind it a distinct urticarial reaction and on the left forearm and hand, on both palmar and dorsal surfaces, could be seen a vesico-papular eruption with urticarial areolae; while the left half of the face showed plainly several urticarial lesions with distinct sub-cuticular swelling. Very little itching was admitted although the hand having the elevated eruption showed evidence of local irritation and scratching. The mucous membranes of the mouth and pharynx were slightly reddened, the whole appearance being that of a multiform erythema with distinct urticarial lesions in several areas of the body. The only probable cause of this condition was that of unusual indulgence in oysters. The young woman gave a history of a tendency toward a skin eruption with slightest digestive disturbance and stated that she frequently had noted small papules appear on her body about the menstrual period. The eruption just described appeared at about the close of this period.

After reviewing the history of the illness we were able to rule out communicable disease and so advised the school authorities.

While in Chambersburg I saw, at Dr. Skinner's request, a four and one-half months old child believed to have scarlet fever with the eruption appearing about ten days ago but at the time of my visit was able to find no positive clinical evidence. I am inclined to question the diagnosis but with the patient already under quarantine for scarlet fever and every precaution being observed it seemed wiser to avoid making a positive diagnosis and urged that the same care be continued as if the disease were certainly scarlatina.

Learning through Dr. Hunt that representatives of the School Board of Chambersburg were in this office making complaint concerning public health conditions in their city, I called upon Dr. McClanahan, president of the Board of Health, and learned through him that certain alleged violations of quarantine laws were known to the Board but that for the most part regulations were well carried out. Some correspondence had previously been addressed to the Secretary of this Board and his reply lay on my desk at the time of this visit. After reviewing the situation with the president and learning on my return the details of the complaint alleged by the school authorities, a letter was addressed to the health officials, calling their attention to irregular methods practiced by the Board and warning them that they had no power to set aside an organic law of the Commonwealth, concluding with the request that they advise you as soon as they had brought up their regulations to legal requirements.

REPORT OF INSPECTION AT PENN HALL, CHAMBERSBURG, ON ACCOUNT OF SCARLET FEVER.

Pursuant to instructions issued in person after reporting a telephone conversation with Dr. Frank Skinner of Chambersburg that a disease resembling scarlet fever had developed in one of the students in Penn Hall, the preparatory school for Wilson College, standing within the limits of Chambersburg, I proceeded to this city forthwith and was able to agree with Dr. Skinner that the girl, a young lady sixteen years of age, suffered from the type of this disease known as scarlatina simplex.

It was impossible to trace the source of infection in the school. The nearest we were able to come to a possible source was that on the preceding Friday a reception had been held which many residents of Chambersburg attended. You will recall that Chambersburg has for six or eight weeks been afflicted with a very mild type of scarlet fever. The reception you will note was held on February 10th, the first symptoms of the illness developing during the latter part of the night of the 13th and 14th. The room-mate of this young lady was in the infirmary suffering from an acute cold, two other students in the school being confined with them. As soon as the rash appeared they were separated from the girl believed to have scarlet fever and on the advice of Dr. Skinner, concurred in by your representative, they will be held in isolation for a period of ten days.

The school authorities are trying to make arrangements to at once transfer the student suffering with scarlatina to a building outside

of the school grounds. Inasmuch as the student had not been out of her room, except to be transferred to the infirmary, after the exposure, it was not deemed wise to close the entire dormitory or to place all students in quarantine.

Everyone connected with the institution seemed to enter heartily into the spirit of quarantine and I am sure every recommendation made will be strictly complied with.

An effort was made to see the Secretary of the local Board, but finding that he was out of town, word was left with his wife that a representative of the Department had seen the case and he was told our recommendations.

SUPPLEMENTARY REPORT, PENN HALL, CHAMBERSBURG, ON ACCOUNT OF SCARLET FEVER.

By your permission, and at the request of Miss F., Principal of Penn Hall, and Dr. Skinner, the attending physician, I again visited this institution in order to strengthen the hand of the school authorities in relation to the quarantine established February 14th, and for the further purpose of trying to quiet the excitement incident to a second case developing scarlatina simplex on the school premises.

February 21st a maid believed to have carried a tray from the kitchen to the students' infirmary, sickened with mild scarlet fever. She had been on duty in the kitchen the morning the diagnosis was made and at the very first appearance of the rash was carefully isolated in the building occupied by the student and nurse well outside of the school grounds. The rumor of this illness had reached the parents of some of the students and the trustees were considering a plan to dismiss school.

By your advice a complete investigation was made and a letter was issued to the school authorities reading as follows:

"After reviewing the situation at Penn Hall as reported by you and Dr. Skinner, the Commissioner of Health has ruled that you discontinue admitting day students for the present, that you limit your girls to the grounds of the institution and the open sections adjacent thereto and that you shall not dismiss school and send girls to their homes for a period of two weeks after the maid now ill with scarlet fever left the kitchen.

A further ruling by the Commissioner, however, provides for emergencies that may arise where it may be necessary to permit some student to leave. In such case you are directed to have a physician examine the student with great care, searching for evidence of disease. If found well you are to secure permission from the local Board of Health for her to leave the institution and permission from the State Department of Health for her to travel through the State. If the place of residence is in an adjoining Commonwealth, permission will be secured by this Department from the health authorities of the other states, in advance of her leaving.

In other words, consider your school under the supervision of health authorities at the present time and without using the term that might excite your students, unnecessarily, count yourselves in quarantine. I feel that with your diplomacy, coupled with the tactfulness of the teaching staff, you will be able to allay excitement among the girls and perhaps be able to continue your work until the regular Easter holiday without further annoyance."

At the time of this visit our representative met with the principal of the school, several members of the board of trustees and the attending physician, all of them agreeing that it was the part of wisdom to hold these girls two weeks after the maid served food in the kitchen.

By telephone direct, previous to my visit, day pupils had discontinued their attendance at school and boarding students were forbidden to enter the town or visit that part of the campus set aside for Wilson College. The boarders however, were given the liberty of their own grounds and the open country adjacent thereto.

It is a pleasure to state to you that everyone connected with the school showed the very highest regard of the State's work and their willingness to carry out any directions issued by the Department.

At the conclusion of my investigation accompanied by Dr. Skinner, we visited Dr. Miley, Secretary of the local Board of Health and Health officer and with his full knowledge and consent, the letter was forwarded that had been drafted prior to leaving this office.

SMALLPOX AT DANVILLE, MONTOUR COUNTY.

At the request of Dr. George A. Stock, County Medical Inspector of Montour County, I went to Danville this morning to see with him two cases of an eruptive disease believed to have been smallpox, one of which resulted in the present outbreak in Columbia and Montour Counties, probably bringing the infection from North Dakota or Minnesota. The initial case, John M., a man of 25, now residing with his brother-in-law, B. H. H., along a rural free delivery route eight miles north of Danville, left the residence of Richard P., six miles west by one mile south of Jamestown, North Dakota, on the 17th day of November, stopping until the early morning of November 21st at the residence of his brother, Ray U., at Fridly, five miles west of Minneapolis, Minn., arriving at the H. premises late in the evening of November 24th. On the 1st and 2nd days of December he was ill with headache and vague pains, but continued working in the woods. About the third or fourth day of December a papular eruption appeared upon his face, arms and trunk, running through a rapid course of vesiculation, pustulation and crust formation and at present presenting only a few scars.

On the 17th day of December his sister, Mrs. H, sickened with chills, headache, backache and probably some fever, these symptoms continuing until some time on the 20th or 21st, when the patient alleges she was feeling as good as ever, but reports that about this time a papular eruption appeared upon her extremities, chest and

face. This eruption ran a rapid course and presents at the present time a few characteristic scars of variola.

Fellow boarders, George W. O. and Alfred M, in this house, sickened about the 19th or 20th of December; O in his house, No. 42 Centre St., Danville, and Alfred M, at Morganville, Mt. Pleasant Township, Columbia County. These boarders are now known to have smallpox.

The case in Danville first being reported as chicken-pox and later as smallpox led to the investigation and to the development of the history of suspicious illness. Proper quarantine regulations have been established by Dr. Arment in Columbia County, by the local Board of Health in Danville and all contacts in both sections have been vaccinated and are now on parole with the exception of one J. C. B. in West Hemlock Township, Montour County. He having refused to accept vaccination, was placed under absolute quarantine.

In company with Dr. Arment and Dr. Stock, I examined John U and Mrs. H and am of the opinion that both cases have been mild all fifteen or twenty pustules and Mrs. Hendrickson a smaller number. A puzzling feature in the history of the household is that two of Hendrickson's children are unvaccinated and up to the present time have seemed to escape infection.

You will note by computing the interval elapsing between Umstead's leaving Dakota and arrival in Pennsylvania that he may have received his infection just prior to starting east or he may have received it while in Minnesota. A letter has been written to the State health officials in each Commonwealth apprising them of this fact and requesting a report on local conditions.

Some seventeen contacts are under observation in Montour County alone. One contact, Charles Hendrickson, had gone to Northumberland County but returned today and is now under Dr. Stock's observation.

George Ortman is said to be pretty sick in Danville, but his physician assures us he will recover. More than twelve citizens of Danville have been in close contact with this man since the eruption appeared and a serving woman from this household looked out for food supplies at a banquet given some fifty citizens of Danville two days after Ortman's eruption developed. The local Board was advised to treat all of these cases as contacts and to urge vaccination in each person not fully protected. The interval after exposure is so great in some of these contacts that I fear vaccination will not protect all. In fact a next door neighbor to Ortman who was exposed about eleven days ago is today showing prodromal symptoms. It therefore seems entirely probable that other cases will sicken in Danville and probably other cases in Montour County. The local

officials in each district are fully alive to the danger and I believe are able to cope with the situation.

REPORT OF INSPECTION AT KENNETT SQUARE, CHESTER COUNTY ON ACCOUNT OF SMALLPOX.

Pursuant to your order issued in person January 23rd, I proceeded to Philadelphia and on the morning of the 24th, visited the borough of Kennett Square and saw the patient, with Dr. Reynolds, believed by the physicians in Kennett Square, and our County Medical Inspector, Dr. Scattergood, to be suffering with an aggravated form of chicken-pox.

The patient, by name of Marshall L., an unvaccinated man 35 years of age, member of the firm of L. & G., dealing in meat and meat products with retail stalls in the Second street market, Wilmington, gives a history as follows:

He sickened with headache of a severe type, backache and probably some fever on Friday the 13th day of January. These symptoms varying in degree, continued until Tuesday, the 17th day of January. On Wednesday and Thursday, the 17th and 18th days of January, he states he was feeling as well as he ever felt in his life, although he admits that on the 17th certain papular eruptions were noted on his back and shoulders, the examination being made by his wife because the weight of his clothing seemed to give him distress. These lesions grew larger, others appearing on the face, hands and legs, and on Friday after the closure of his stall in the market he consulted Dr. Quinn of Wilmington, admitting that the reason he sought this advice was that the eruption on his face was becoming so noticeable and annoying that he thought he ought to have treatment. Dr. Quinn diagnosed chicken-pox. On his return home he was placed under the care of Dr. S. C. Reynolds, the family physician, and modified quarantine was established.

Dr. Reynolds states that he became suspicious of this eruption on the 21st and sought counsel, Dr. Maurice Hughes, Secretary of the Board, seeing the case and later also a homeopathic physician in the village whose name I do not now recall. On Monday Dr. Scattergood saw the case with them and all were inclined to believe that the illness was only an aggravated form of chicken-pox.

I was able without much difficulty to establish the diagnosis of smallpox and advised that the usual regulations be established at once, together with an active vaccination campaign in the immediate vicinity of the household.

There are a good many contacts. Four out of his five children are unvaccinated and his wife has never had this operation tried. There are several contacts in the butchering establishment and a number of neighbors have been in and out of the house since the illness began.

I immediately communicated with the local health officials in the City of Wilmington telling them that this man had waited on his customers in the market on Friday with a 3-day eruption of smallpox on his body.

The health officials in the borough of Kennett Square are not very aggressive, yet they seem perfectly willing to carry out a campaign as rigid as the Department should prescribe. They were rather too anxious to transfer the patient to a smallpox hospital on the grounds of the County Almshouse. We learned through Dr. Scattergood today that they had succeeded in transferring him last night to this building. The driver, a trifling negro, is said to have gotten very drunk and called at three or four stores on his way back to Kennett Square, spending the night in a little restaurant in the settlement of Embreville. Dr. Scattergood reports that the community is considerably excited over this exposure and on our advice he has proceeded to offer vaccination and disinfection in each premises visited by this man and has sent a Health Officer to take charge of this negro and the carriage and to establish suitable regulations at each premises visited. After reporting to you conditions found by Dr. Scattergood a letter was forwarded the health authorities in Kennett Square telling them that the Department would expect them to pay all expenses contracted by the State in cleaning up after this negro and forbidding them to move any other case from the village until this Department had been satisfied in advance that safe precautions would be practiced in such transfer. They were also told that unless we were very soon assured that a suitably rigid campaign was inaugurated for the stamping out of this infection the Department of Health might find it necessary to quarantine the village against the outside world.

TYPHOID FEVER IN CHAMBERSBURG.

On receipt of a verbal communication that nineteen cases of typhoid fever had sickened within thirty days in the City of Chambersburg and having other field work to do in this community I stopped in this city and went over the local situation with the City Health Officer, Dr. H. M. Miley, and beg to report that out of the 16 or 17 cases occurring recently all of them received their household milk supply from two retail dealers, whose stables were in the city limits, in the western end of the county, and each of these dealers, one named Hafer and the other Welker, have typhoid fever in their dwellings.

I found Health Officer Miley active and aggressive in looking up these cases and that he had made a complete census of all cases, tracing the milk, water, and other food supplies in every instance and found that he had communicated with the Department asking permission to ship samples of water from several springs in use in the vicinity of these infected households and from all wells in use in this section of the town; also from one spring in the vicinity of the Sewage Disposal Building, and one in the vicinity of the building owned and operated by the Electric Railway Company.

TYPHOID FEVER AT JENKINTOWN.

By your direction, I reviewed the typhoid situation investigated by Dr. W. B. Jameson in the borough of Jenkintown, and am in agreement with him that the localized outbreaks in the vicinity of the junction of Walnut and Division Streets and in Haley Court are probably in good part due to fly infection. The water supply and the milk supply were in no way at fault. The earliest case of typhoid in the household of one Shaughnessy, the latter part of August, was not diagnosed. The excreta from this patient and subsequent cases in the same household were thrown into a privy without disinfection and within a radius of one hundred and fifty feet from the dining room and kitchen doors of the afflicted household. Flies were found in every household.

A full report of this outbreak, together with a plot of the section of the town infected will be submitted at a later date by Dr. Jameson.

TYPHOID FEVER.

Wyncote, Cheltenham Township, Montgomery County.

By your direction, I investigated the outbreak of typhoid fever at Wyncote, Lower Cheltenham Township, Montgomery County, where it was reported eight cases of typhoid fever had sickened in an Italian shack near the Jenkintown station.

After a lengthy telephone communication with Dr. M. K. Neiffer, I learned that the infection in all probability was imported to this shack either from surface drainage of the yard and trackage adjacent, or by some incoming Italian. A large pool extending under one end of this dwelling may have furnished the pollution that was carried into the dwelling by insects, a total of six persons occupying this end of the dwelling sickening with typhoid fever. None of those living in the adjacent dwelling contracted the disease. The engineers and

track gangs of the railway thoroughly cleaned the yards by means of lime and completely abated the pool nuisance and will, as soon as the remaining patients recover, disinfect the entire shack.

The water supply was readily ruled out by laboratory study and by the fact that none of the others taking water and living in the adjacent dwelling sickened. The milk supply was used by many persons in the vicinity without noticeable effect on their health.

TYPHOID FEVER AT WYNCOTE, CHELTENHAM TOWNSHIP, MONTGOMERY COUNTY.

By W. B. JAMF'SON, M. D.

By your direction, received at the same time I was asked to investigate the outbreak of typhoid fever in Jenkintown, I proceeded to Wyncote to investigate an outbreak of typhoid fever in an Italian colony a few hundred yards below the freight station of the Philadelphia and Reading Railroad at Jenkintown.

The building in which the cases sickened is a 60x20 ft. shack varying from 10 to 20 ft. from the bank of the Tacony Creek and houses about thirty men, women and children. The building is filthy; dogs, cats, goats, flies and everything that tend to make filth go into the dwelling and by reviewing the history of sickness developing, I find that seven persons contracted typhoid fever here in rapid succession, most of them having been treated in Philadelphia Hospitals, several of whom remained in the shack, however, with the services of a visiting day nurse. One child died and a poor Italian mother now lies near death.

In searching for the cause of the infection, milk, ice and food stuffs could readily be ruled out. The spring of water having its origin under the tunnel at the Jenkintown station and its exit at the edge of the creek, supplies the colony with their domestic water supply. This spring is flooded with creek water with every rain storm. Health Officer Neiffer, of Cheltenham Township, assures us, however, that this spring has been obliterated within a few days and is now a thing of the past.

Judging from the history of the illness and dates of sickening, it is altogether probable that an Italian convalescent with typhoid, perhaps a carrier case, came into this shack and that his excreta are responsible for pollution of food and dissemination of infection.

The seven cases directly traceable to the F. shack are given first in the summary accompanying this report. Three other cases were found in this vicinity, however, one B. D. known to these Italians and

said to have visited them occasionally, one J. K. who worked in Tacony Creek, keeping a pump in repair used by Miss L., one T. M. who lived at the ice plant at Wyncote, handling all the ice, the plant being located on the banks of Tacony Creek and one other case on the far side of the Township at Rock Lane.

I wish to say that this old shack in which the Italian colony lived, which is owned by the P. R. R. Company, is a menace to public health. The building stands so close to the creek that all household waste goes into it. The privy is so far away and the creek so near that these Italians use the creek continuously at night and as a place for emptying chambers. The building itself is filthy and I believe if the Railway Company were urged to do it they would abandon it as a place of residence for poor people.

Flacko household infection.

Mrs. Tony Flacko, Italian, 38 years of age, Wyncote.

Onset: 9-8-11.

Reported 9-22, Samaritan Hospital.

Mr. Flacko, assistant foreman (road-bed), P. & R., N. Y. Division.

Conducts boarding house, south of Greenwood Avenue, Wyncote.

17 or more persons.

Letitia Flacko, 14 years of age.

Admitted 8-30-11, Samaritan Hospital.

Death: 9-4-11.

No report.

No onset.

Jos. Flacko, 3 years of age.

Sick on September 25th at Wyncote.

Jennie Flacko, 7 years of age.

Sick on September 25th at Wyncote.

Madago Flacko, 18 years of age.

Said to be sick. A gangman.

Eugene Borgia, Italian, 21 years.

Onset: 9-1-11.

Admitted in Penna. Hospital: 9-12-11.

Report: 9-20-11.

Laborer P. & R. Lived in shanty near creek, Jenkintown station.

Jacobin LaLucia.

Sick September 25th, at Flacko's. A gangman.

John Kempf, 33 years of age.

Admitted 9-21 to Pennsylvania Hospital

Lives in cottage on Rock Lane, Cheltenham Hills, on property of Mrs. Caroline Lippincott, gardner.

Use Moreland spring water.

Mrs. Mainin, on Rock Lane.

Said to be sick.

Benj. DiMascio, 20 years of age.

Admitted 10-5-11, Pennsylvania Hospital.

Had been living in box car on P. & R. at Pottstown.

Thos. Moestin, 22 years of age.

Reported 9-19-11, Pennsylvania Hospital

Admitted 9-16-11.

Lived at Ice Plant, Wyncote, elevator man, handling all ice.

Plant is on Tacony Creek near Tony Flacko.

TYPHOID FEVER AT JENKINTOWN.

By J. W. JAMESON, M. D.

In compliance with instructions issued by telephone after receipt of a letter from the Hon. R. F. Campbell, Burgess of Jenkintown, reading as follows:

"The local situation in Jenkintown and vicinity in respect to Typhoid Fever is to us alarming, and I do not know whether our Local Board of Health at Jenkintown, Pa., has advised you or not. There have been within the last two weeks 8 cases and several deaths. In Wyncote and vicinity about 15 or 16 cases and several deaths and at Rock Lane, right near Wyncote, there have been 3 or 4 cases.

In Jenkintown, most of the cases are in one locality of the town, and if it is at all possible, I believe that your Department should look into the cause of the trouble and have it remedied. The facilities of the local Board of Health are necessarily limited in a borough of our kind, but when they advise that the Typhoid Fever is caused by some building operations on new ground, from what I understand, the only way to get Typhoid Fever, it seems that somebody who knows something about the subject should step in.

Anything you may be able to do under the circumstances for us will be greatly appreciated by the people of Jenkintown."

I proceeded to investigate the localized outbreak of typhoid fever in the Borough of Jenkintown and beg to report as follows:

Jenkintown is a borough situate in Montgomery County, ten miles north of the Philadelphia City Hall, along the New York Division of the Philadelphia & Reading Railroad. The population census figures for 1910 are given as 2,968. The growth of the town has been rapid since the taking of the census and there are probably considerably more than 3,000 people residing in Jenkintown at the present time.

The water supply in Jenkintown is furnished by a public corporation, the water being pumped from a series of sixteen drilled wells. Connection from the local company system is maintained with the Moreland Spring Water Company. No public sewerage works are maintained in Jenkintown; local brick sewers or terra cotta sewers are, however, maintained on Maither Road, Wyncote Road, Summit Avenue and Greenwood Avenue. The sewers do not extend to the section where it is alleged a localized epidemic of typhoid fever exists.

After conference with Mr. Trank, Secretary of the Board of Health for the borough, an investigation was made at the houses from which cases of typhoid fever were reported and at premises where investigation led me to believe that typhoid fever might have existed or might now be found and have the honor of submitting a brief summary of conditions as I found them, together with abstracts of the report on each case and a brief discussion of the topography of Jenkintown in the vicinity of the localized outbreak.

Taking all cases for which I could find a record and grouping them by districts, I find the first case sickening in the localized area now infected to have been M. S., a girl of 15 living at 463 Division Street. This girl developed an illness on the 29th of August that was not diagnosed as typhoid fever, but is said by the family physician to have continued for a period of ten days or longer. During her illness the stools were deposited in a privy on the rear end of the lot, no disinfectant having been used, the privy when examined by me was found to be well filled and not screened from flies and insects.

On the 11th of September, thirteen days after her illness, an 8-year-old child sickened in the same dwelling; on the 19th of September, a 12-year-old boy sickened in this house; on the 30th of September a 10-year-old lad sickened in the same family, and on the 17th of October a 7-year-old child contracted genuine typhoid fever. No adequate disinfection of excreta was carried out in this dwelling and no disinfectant was added to the contents of the privy vault.

During the period when this series of cases was developing in the premises at 463 Division Street, other cases of typhoid developed in the immediate vicinity. On the 21st and 26th days of September respectively, two members of the household in premises 332 Walnut Street, came down with typhoid fever. On the 3rd and 17th days of October respectively, a father and child sickened with the same disease at 407 Haley Avenue. On the 24th of September a 6-year-old girl sickened with what was most probably typhoid at 406 Haley Avenue. On the 18th of September a young man 20 years of age sickened at 400 Division Street, and on the 18th of September, the 13th, 16th and 19th days of October, four children ranging in ages from 3 to 16 developed the disease at 404 Division Street. The only other cases of typhoid fever sickening in Jenkintown during this period of time was one patient at 306 Hillside Avenue, sickening as far back as July 26th, the disease developing subsequent to a visit to the city of Reading, a man, by occupation a chauffeur living at 462 Leedom Street, on the 16th of October, this man's occupation carrying him into many sections of the country and exposing him to various polluted water, and making it impossible to connect his infection with any particular food or water supply and the daughter of a clergyman, living at 168 Greenwood Avenue, who sickened after a visit to New Athens, Ohio where typhoid fever was epidemic.

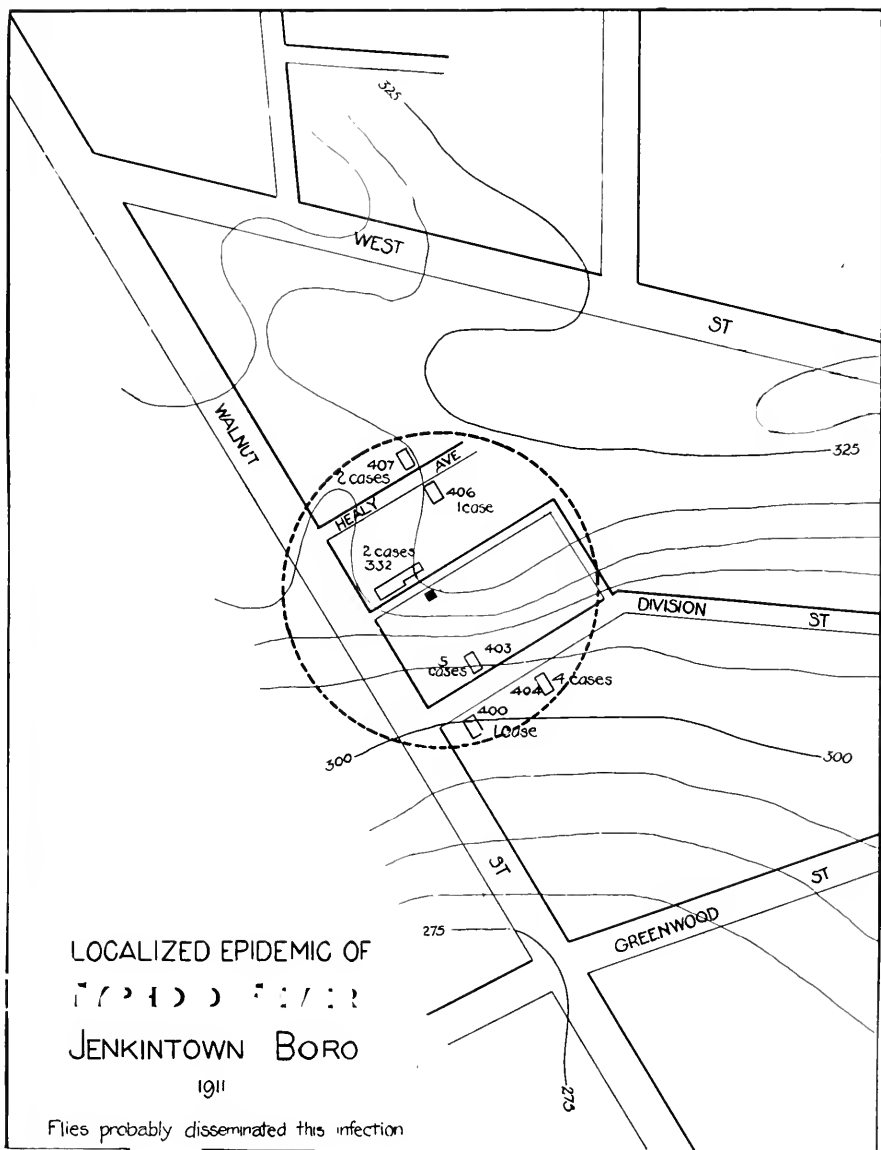
It would seem, then, that the only cases of typhoid fever occurring between July and the date of this investigation, that have not occurred in this localized outbreak, can in all probability be traced to infection outside of Jenkintown. The public water supply cannot possibly be the source of trouble in this outbreak, because all of Jenkintown receives the same supply and there is nothing in the distributing sys-

tem to indicate that the people in this section of Jenkintown received a water less potable than was served other citizens. Milk most likely had nothing to do with it, because these householders were supplied with milk coming from three distinct and separate sources, one of them getting milk from an ideal dairy farm. Vegetables can be ruled out as a source of infection, because they were purchased miscellaneously from different dealers and these dealers supplied many other citizens of the borough not infected.

Granted that the case not diagnosed as typhoid fever sickening on the 29th of August did have typhoid fever, with the knowledge we have of infected excreta from this patient and from subsequent patients whose discharges reached the privy on the rear end of the lot at 463 Division Street, abundant opportunity was offered for flies to convey infection from this source directly to families in the immediate vicinity. A study of the relation of these houses to each other shows that it is less than 12 ft. from the unscreened privy on the first infected premises on Division Street to the dining room and kitchen windows of the first case sickening on Walnut Street, and within a radius of 150 ft. from this first infected privy will be found the windows and doors of the dining rooms and kitchens of all infected premises in this locality. Further, in every one of these houses at the time of my visit, many flies were found and while in two or three instances screened doors and windows were noted, enough flies were within the dwellings to account for gross pollution of food supplies. In several of these dwellings some of the cases may have been secondary to earlier cases in the house, the infection being trailed from individual to individual through careless nursing or lack of care in handling the discharges, in keeping them screened in the dwelling and the like, but where the neighbors had nothing to do with the nursing and were not visitors to the household it would seem as though flies might readily have carried the infection directly from this privy into the adjoining household.

It is my firm conviction that this outbreak may be explained in good part as one due to lack of care in the first household infected and to the use of an improperly constructed privy, for which the local authorities are responsible and flies figured largely in the dissemination of the disease.

I am of the further opinion that insufficient legislation by our Council and inactivity on the part of our Board of Health, together with failure on the part of the owner of this block of property to install proper drainage facilities are responsible for the insanitary conditions found. Certainly all of the privies in the infected locality are too shallow, few of them have been properly cleaned and the kitchen and laundry waste in the vicinity runs along the alley surface into a street gutter and creates a nuisance horribly offensive to the nostrils in certain seasons of the year.



Dwelling 463 Division street.
Marion Shaughnessy, aged 15.
Onset: August 29, 1911.
Not diagnosed and not reported.
Householder: Michael Shaughnessy.
Edward Shaughnessy, aged 8.
Onset: September 2nd.
Second case in house.
Frances Shaughnessy, aged 12.
Onset: September 19th.
Third case in house, sent to Germantown Hospital.
Robert Shaughnessy, aged 10.
Onset: September 30th.
Fourth case in house.
Paul Shaughnessy, aged 7.
Onset: October 17th.
Fifth case in house.

Dwelling 404 Division street.
Joseph Doheny, aged 11.
Householder: Thos. J. Doheny.
Onset: October 19th.
Fourth case in house.
Catherine Doheny, aged 3.
Onset: October 16th.
Third case in house.
Francis Doheny, aged 6.
Onset: October 13th.
Second case in house.
James M. Doheny, aged 16.
Onset: September 18th.
First case in house.

Dwelling 400 Division street.
Virgil Lackman, aged 20.
Householder: Charles Lackman.
Onset: September 18th.

Dwelling 406 Healy Ave.
Mary Bleacher, aged 6.
Householder: Daniel F. Bleacher.
Onset: September 24th.

Dwelling 407 Healy Ave.
Mary Elizabeth Musser, aged 2 years, 5 months.
Householder: C. Dale Musser.
Onset: October 17th.
Played with Bleacher child.
C. Dale Musser, aged 32.
Onset: October 3rd.
Removed to Methodist Episcopal Hospital.
Died October 17th.

Dwelling 332 Walnut street.
Alice Gilligan, aged 20.
Householder: Edward Gilligan.
Onset: September 26th.
Edward Gilligan, aged 26.
Onset: September 21st.
Removed to Jewish Hospital.

Dwellings other portions of Jenkintown, not connected with localized outbreak.
Cases infected elsewhere.

Dwelling 462 Leedom street.
Xuiver Mangold, aged 35.
Onset: October 16th.
Sent to Germantown Hospital.

Dwelling 168 Greenwood Ave.
Geraldine Ely, aged 14.
Householder: Rev. J. B. Ely.
Onset: August 27th.

Dwelling 306 Hillside Ave.
Stephen B. Saylor, aged 4.
Householder: C. S. Saylor.
Onset: July 26th.

SMALLPOX, YORK HOSPITAL.

In compliance with your order issued at noon on November 20, 1911, I proceeded to York by the 2.25 P. M. train, where I was met by Dr. Bennett of the Sanitary Committee and from whom I received the following request signed by members of the Sanitary Committee of Councils:

"York, Pa., Nov. 20, 1911.

Dr. Samuel G. Dixon,
Commissioner of Health,
Harrisburg, Pa.

Dear Doctor: The Sanitary Committee of Councils respectfully request that you send an Inspector to investigate some suspicious cases of smallpox existing in the York Hospital, York, Pa. This we pray, as there is a difference between physicians in their opinion as to the diagnosis of the disease.

M. L. Van Baman,
S. Horace Gotwalt,
J. D. Brenner,
Benj. M. Knowles,
J. H. Bennett,
E. S. Cranmer,
H. F. Reginthal,
Jas. E. Chalfant."

Accompanied by Dr. Bennett and County Medical Inspector, J. S. Miller, I was driven to the York Hospital where I examined first a two-year-old child whom I found to be suffering with mild variola in about the third day of the eruption, and later examined a man of 48 or 50 years suffering with varioloid and a healing vaccinia. This man had resided in a ward with a case of smallpox for four days prior to vaccination. The child lived in a remote part of the Hospital during the same time. An attempt was made to vaccinate each of them when the smallpox patient was removed to the sanitary hospital, resulting in a delayed but active take in the man and in failure in the child. No other case of smallpox developed.

I found the Hospital to be under absolute quarantine, the technique of which was apparently being carried out with great care. No other patients showed signs of variola. Two new-born babes in the institution had not yet been vaccinated, but I was assured before leaving that they would be vaccinated immediately. The patients will be transferred to the sanitary hospital and given proper care at that point. The hospital authorities assured me that they will immediately re-vaccinate all individuals that have not been vaccinated within five years who have proven refractory to re-vaccination since the recent exposure to infection. The Sanitary Committee will grant permission within a few days for all individuals who are well and who have been successfully vaccinated within recent weeks to take an

antiseptic bath, dress in their clothing which has already been carefully disinfected, and remove to their homes, in this way giving opportunity for the hospital authorities to gradually close all parts of the building except the wards in actual use.

The infection, as you have already been advised, was introduced through the admission to the Hospital of a Russian, traveling with an opera company, who sickened in a hotel in York and was transferred to the Hospital, where he was a patient when the eruption appeared. The campaign by the local health authorities seems to have been thorough and apparently reached every employee of the hotel and, as far as possible, those who were guests at the time this first patient sickened, but was not as thorough as we could have wished in locating every possible visitor to the Hospital during the time this man was a patient in the ward.

While in York I took advantage of an invitation to call upon Mayor-elect Lafean and was assured by him that he would include in his inaugural address a strong recommendation for the abolishment of the Sanitary Committee and a further recommendation for the appointment of a Board of Health in compliance with the legal requirements for cities of the third-class.

REPORT OF CONFERENCE WITH PHILADELPHIA OSTEOPATHIC SOCIETY.

Pursuant to instructions, I proceeded to Philadelphia Thursday evening, March 23, and addressed the Philadelphia Osteopathic Society in their rooms in Odd Fellows' Hall. My remarks were confined to the rules and regulations of the Department of Health, as applied to physicians and the relations that physicians bear to the Department, explaining in considerable detail the duties of each, concluding with a period of ten or fifteen minutes opportunity for queries, during which time questions were asked by the various members of the association and answered by your representative.

It gives me pleasure to report that I was graciously welcomed by the President of the Organization, that the remarks were well received, that many intelligent questions were answered and very much to my surprise more than half of the twenty-five or thirty questions asked, related to tuberculosis and the Department's Dispensaries and Sanatoria care for those afflicted with this disease.

PUBLIC HEALTH CONFERENCE WITH THE PENNSYLVANIA STATE GAME AND FISH PROTECTIVE ASSOCIATION.

Pursuant to instructions I proceeded to Philadelphia March 25th for the purpose of attending the Conference in the Interests of Public Health, Wild Game, Fish and Forestry, held under the auspices of the Pennsylvania State Fish and Game Protective Association, at their rooms in the Crozier Building, 1420 Chestnut Street, Philadelphia.

Those present were:

Dr. Joseph B. Kalbfus, Secretary State Game Commission.

William E. Meehan, State Fish Commissioner.

Dr. Joseph T. Rothrock, Secretary of State Forestry Association.

Dr. B. Franklin Royer, Chief Medical Inspector, Department of Health.

Frank Eames and J. Frank Meehan, representing the Pennsylvania State Sportmen's Association.

Charles Wetherill, representative of Sportsmen's Private Clubs.

Dr. H. N. Oestreich, representing the Inter-State Anglers' Association.

Dr. T. Chalmers Fulton, Joseph Johnson, Wm. E. Lockwood, Jr., S. E. Landis, Marion G. Sellers, Edward D. Hemingway, representing the Pennsylvania State Game and Fish Association. Edwin Hagert.

The meeting was called to order by M. G. Sellers, who said this was an age of co-operation, and that the various organizations identified with the Game, Fish, Forestry and Public Health interests of the State were so closely allied that the most good would be accomplished by working in harmony for the passage or defeat of measures coming before the Legislature that met with the approval or objection of the interested departments.

On motion, Mr. Joseph Johnson was elected Chairman of the meeting.

On motion, Mr. Wm. E. Lockwood was elected Secretary.

Mr. Meehan, representing the Department of Fish, then addressed the meeting and asked the support of certain bills for improving the fishery interests and incidentally protecting the purity of water supplies.

He also advocated the passage of a measure that will secure to the State by right of eminent domain or other means a roadway or means of ingress and egress to lakes owned by the State, the land surrounding which is owned by private parties.

Moved by Mr. Sellers and seconded by Dr. Fulton, that the sentiments of Mr. Meehan be endorsed, and that the delegates present notify the members of the various associations they represent, to approve or disapprove the various bills referred to by Mr. Meehan as he recommends. Adopted.

Dr. Rothrock next addressed the meeting, and stated there were only three bills that affected his department, all of which he approved of, and particularly one that provided for the opening of outing and recreation grounds on the Forest Reservations, always with proper regulations regarding health and sanitary arrangements and in no sense to be used as sanatoria.

Moved by Mr. Sellers, seconded by Mr. Wetherill, who particularly urged support of the above measure, that the delegates present notify the members of the various associations they represent to approve and support these measures. Adopted.

Mr. Eames asked for information on the Kilsay bill giving railroads right of eminent domain on Forest reservation lands.

Dr. Rothrock said that a test case was under contemplation by the railroads, that the question would undoubtedly have to be decided, but that his Department was opposed to it.

Moved by Mr. Meehan, seconded by Mr. Eames, that any measure that may be presented giving corporations or business interests right of eminent domain on forest reservations, be opposed, and that the delegates present notify the members of the various associations they represent to so act. Adopted.

Dr. B. Franklin Royer next addressed the meeting. He said so far as he was aware the Department of Health would ask for little new legislation and that it seemed unlikely that any bills now before the Legislature would pass that are in any way detrimental to the Health Department. In a number of instances amendments have been suggested by the Commissioner, all of them being kindly received either by those who introduced the measure or by the Committee having the bill in charge.

REPORT ON THE INVESTIGATION OF AN EPIDEMIC OF SCARLET FEVER AND DIPHTHERIA AT SHENANDOAH, SCHUYLKILL COUNTY.

Reports from the Shenandoah Board of Health showed a progressive increase in the number of cases of scarlet fever and diphtheria occurring in that borough during the months of November and De-

ember, 1910, and January, 1911. In order to ascertain the reasons, Doctor Kennedy, the County Medical Inspector, was instructed to visit Shenandoah on January 22nd. His verbal report indicated improper quarantine regulations, ignorance of any enactments on public health by the Legislature since 1895 and dissension among local authorities.

In compliance with your instructions to inform the authorities in that borough that "the Act of Assembly of May 14, 1909, must be fully complied with or you are instructed to set aside their ordinances and take charge of the borough," I proceeded to Shenandoah on January 24th, 1911.

A description of the physiographic and industrial conditions would lead to a better understanding of the reasons for the present prevalence of diphtheria and scarlet fever. The area of the borough is approximately one and one-half square miles and at the present time the town is built up to the borough boundary lines to all points except in a few instances where conditions make the land uninhabitable. It is complained of by local authorities that further expansion of the corporate limits is impossible because of the refusal on the part of the large coal companies to dedicate or sell land for building purposes.

The official census for this borough is as follows: 1890, 15,944; 1900, 20,321; 1910, 25,774.

Of the total population approximately 18,000 are foreign born, the majority being of the Slavonic race. Polish and Lithuanian are the predominating tongues spoken, though the various tongues and dialects spoken in the borough number twenty-two among twenty-six nationalities.

The Catholic Church claims 21,000 communicants and of these but about 3,000 are English speaking.

There are nearly two hundred retail licenses for the sale of alcoholic drinks.

Despite the rapid increase in population there have been but few buildings for housing purposes erected during the past ten years and the transformation of a large number of homes, particularly in the third and fourth wards, into housekeeping apartments has become a necessity. This rate of increase for ten years of 26.8 per cent. has not been equalled without expansion in any other municipal territory in Pennsylvania.

In the southern part of the borough the zone in which the greater number of cases occurred, the houses are eighteen or twenty feet wide, usually two stories and basement, though often three stories, and so divided and partitioned, that frequently as many as eight families occupy one house. There is an average of five children to each family.

Practically all of the male residents are employed in the anthracite mines which surround the borough. There are but 29 industrial employments of various types, under the supervision of 24 employes and employing only 301 persons.

The method of sewage disposal was the source of so many complaints and has been the reason for so many suits in the Schuylkill County Courts that it seems justifiable to call your attention to the conditions as they were presented to me, both by private individuals and by the borough authorities.

There are but two very short systems which have been placed by the borough and ten or twelve which are owned and controlled by private individuals or imperfectly organized companies; the latter's systems are laid by permission of the Councils but apparently without definite franchise. So far as I could learn there is no standard as to size or construction. The main sewers vary from ten to twenty-four inches in diameter. All of the various systems drain either into the Shenandoah or Kohinor Creeks which are tributaries to Shamokin Creek. The sewer outlets in West Shenandoah are so arranged that free flow into the creek from the mouth of the sewer is not maintained and local stagnation of the sewage is a source of great discomfort and complaint.

The method of sewage disposal in the homes is either by a toilet within the house or a cesspool in the yard, the major portion of these being connected to the main sewer without traps. There is considerable complaint of the traps which are in the main sewer pipes, it being claimed that, because of inefficient methods, odors, particularly in the summer time, are annoying to residents in the neighborhood of the vents.

A plumbing code has never been adopted in the borough; in fact, but few plumbers are said to be properly licensed. In certain public buildings, such as certain of the school buildings, the plumbing is so arranged that syphonage of the closets on the lower floors occurs every time the closets on the upper floors are flushed. There are no vents or fresh air inlets to the fixtures in any of these buildings. The same is true of the borough jail which is in a frightful condition. This is nothing more than a large iron cell, probably fifteen by thirty feet in which five cells and a corridor have been arranged. The closet in each cell has no proper accommodations and at every flushing the dejecta are washed from some of them over the floor of the cell and often into the corridor; likewise there are no vents or fresh air inlets in this building. Prisoners are frequently kept there for periods ranging from twenty-four hours to thirty days. A tin bucket of water and a box of crackers constitute the entire diet.

There are no borough ordinances to control plumbing, the only ordinance which refers in any way to this trade controls the in-

stallation of water pipes under the supervision of the Water Committee. The better class of plumbers desire very much to have a standard specified by the adoption of a plumbing code. Persons who spoke to me on these matters were promptly referred to Health Officer J. J. Stanton, who is the person authorized in the borough to investigate nuisances.

There is fortunately no evidence that the water supply to the borough will be the source of outbreaks of communicable disease. Some fifteen years ago there was a serious outbreak of epidemic dysentery, causing much loss of life and lasting from May to September inclusive. At that time the borough plant was authorized and installed, since which time there have been no water borne diseases, except those which were introduced from outside sources. The Shenandoah Borough Water Company now furnishes approximately 3,700 families and two collieries. A report of the water system is made by the Engineering Division.

Prior to my visit a telegram had been sent to the Secretary of the Board of Health, reading as follows:

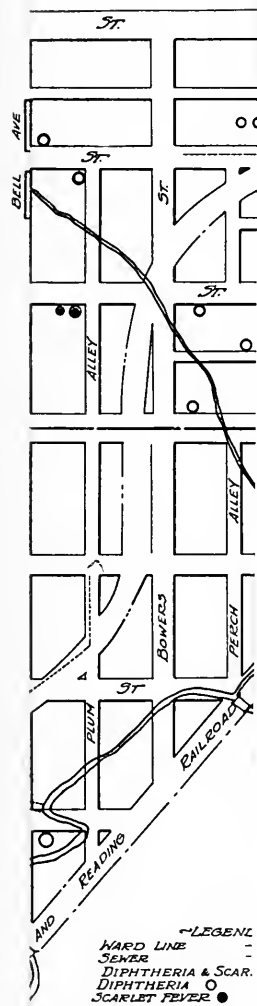
"Mr. M. L. Sweeney, Secretary,
Shenandoah, Pa.

Dr. Hunt will meet you Tuesday, twenty-fourth to advise your Board.

(Signed) S. G. Dixon,
Commissioner."

Mr. Sweeney had already conferred with Mr. M. M. Burk, the Borough Solicitor, and a public meeting had been called for the same evening.

An analysis of the cases reported during the previous three months and a sanitary survey of the borough was made at once in order to learn the location of the major number of the cases and the physical conditions which aided in the distribution and would aid in the prevention of more cases. The borough map attached to this report will show the location of the reported cases and the divisions by wards. The tabulation according to distribution by period of time and ward location follows:



LEGEND
HARD LINE - -
SEWER - -
DIPHTHERIA & SCAR. -
DIPHTHERIA ○
SCARLET FEVER ●



TABLE I.

Morbidity.

	Wards.					Totals.		
	First.	Second.	Third.	Fourth.	Fifth.	Diphtheria.	Scarlet fever.	Combined.
November, 1910:								
Diphtheria,	0	3	0	4	0	7	....	....
Scarlet fever,	0	2	4	11	1	....	18	0
Combined,	0	0	0	0	0	....	....	0
December, 1910:								
Diphtheria,	5	4	4	2	4	19	....	....
Scarlet fever,	1	0	3	4	0	....	8	....
Combined,	0	1	0	0	1	....	....	12
January, 1911:								
Diphtheria,	3	2	4	8	1	18	....	....
Scarlet fever,	0	3	3	14	7	....	27	....
Combined,	0	0	0	1	0	....	....	1
	9	15	18	44	14	44	53	3

TABLE II.

Morbidity Rate Per 1,000 in Relation to Ward Population (1910 census.)

Ward.	Population.	Morbidity.	Rate.
First,	6,827	9	1.3
Second,	1,597	15	9.4
Third,	4,133	18	4.3
Fourth,	6,590	44	6.6
Fifth,	6,627	14	2.1

TABLE III

Mortality.

	November, 1910.	December, 1910.	January, 1911.
Scarlet fever,	6	1	7
Diphtheria,	3	5	3
Combined, .....	....	1	....
	8	7	10

November, 25 reported; 8 deaths 32 per cent.

December, 29 reported; 7 deaths; 23 per cent.

January, 45 reported; 10 deaths; 22 per cent.

The report of cases reported since January 1st, 1910, is as follows:

TABLE IV.

Morbidity.

	Diphtheria.	Scarlet fever.	Combined.	Total.
1910.				
January,	2	3	0	5
February,	3	4	0	6
March,	1	3	0	4
April,	0	1	0	1
May,	0	1	1	2
June,	3	5	0	8
July,	1	3	0	4
August,	6	3	0	9
September,	3	10	0	12
October,	1	10	0	11
November,	7	18	0	25
December,	19	8	2	29
To January 23, 1911,	18	27	1	46
	62	96	4	162

The local Government consists of the Burgess, the present incumbent being W. J. Strolis, a Borough Council composed of fifteen persons, the Lamp and Watch Committee, which has charge of all matters relating to public health. The Board of Health consists of the following:

T. J. Mullahey, President.

Dr. D. J. Langton.

M. Mellett.

M. J. Cadden.

C. E. Smith.

M. L. Sweeney, Secretary.

J. J. Stanton, Health Officer.

M. M. Burke, Solicitor.

The appropriations per year for public health work are as follows:

Salary of Secretary,\$300 00

Health Officer, 720 00

Printing, abatement and other expenses, 150 00

I found the Board of Health was acting under regulations adopted in accordance with provisions of the Act of Assembly of 1895, and were not complying with the provisions of the Act of May 14, 1909. During August or September, 1910, it was found that the original copy of the rules and regulations of the Board of Health, as approved by Councils, had been either lost or destroyed. As it was desired to present the original copy to a local court during an action

by the Board of Health against a private individual for the abatement of a nuisance, another copy of the old rules and regulations without revision or correction was approved in a special session of Councils.

The Secretary and Health Officer were not working in harmony and neither one recognized the Board which employed them as having much, if any, authority. The Secretary kept no records other than a mere file for reports. The report form is as follows:

EXTRACT FROM THE REGULATIONS.

Sec. 31. In all cases of smallpox or of varioloid, epidemic or Asiatic cholera, of diphtheria, of scarlatina, rubeola, typhoid or magignant fevers, the medical attendant, if there is one, head of the family, or nurse, or either of them, shall report in writing to the Board of Health, the name of the patient together with the age, sex, color, nativity and residence, and in case of smallpox or varioloid, shall also state whether vaccinated and when, which shall be recorded by the Secretary of the Board in a book kept for that purpose. Such report shall be made within six hours after knowledge of such case or cases occurring between six o'clock a. m. and six o'clock p. m., or within eighteen hours if knowledge of such case be received between six o'clock p. m. and six o'clock a. m. (PENALTY FOR NEGLECT, \$10 to \$100.)

Shenandoah, Pa., 19

Secretary Board of Health.

I report the following patient suffering with contagious disease:

Name Age
 Sex Color
 Location
 Disease
 If smallpox, has the patient ever been vaccinated and when?
 If vaccinated, what is the character of the mark?
 Has the patient ever had a previous attack of smallpox?
 If smallpox or varioloid, can the case be completely isolated?
 Can the patient be properly cared for at home?
 Do the premises need a sanitary inspection?
 Are any of the children in this family attending school?
 Remarks

.....M. D.
 Residence,

Upon receipt of this a notification was sent to the Superintendent of Public Schools, reading as follows:

OFFICE OF THE

BOARD OF HEALTH

Shenandoah, Pa.,19....

A report has been made to this office that a contagious disease (.....) exists at premises No. Street, and that one of the inmates of said house, attends your school.

You are hereby notified to prevent the attendance of said child at your school until the attending physician has given a certificate that all danger from contagion by reason of such disease has passed away.

EXTRACTS FROM RULES OF THE BOARD.

Section 14. No principal, teacher, or superintendent of any school and no parent or guardian of any child attending any school shall knowingly permit any child sick with any contagious or infectious disease, or any child residing in any house in which such disease shall exist, to attend any school until this Board shall have given its permit therefor. The terms "contagious disease" or "infectious disease" shall be taken to mean the following diseases: Scarlet Fever, Diphtheria, smallpox or Varioloid, Typhus Fever, Cholera, Yellow Fever, and also any other disease publicly declared by this Board to be dangerous to the public health.

By order of the Board of Health,

.. .. .Secy.

Quarantine meant nothing to the local health officers or to the community except the attachment of the warning placard. These officers seem to have no idea of school exclusion, the issuance of quarantine permits, or any other method which would prevent the spread of contagion. The only placards in their possession were those for scarlet fever, diphtheria and smallpox; they bore the name and authority of "Dr. Benjamin Lee, Secretary, State Board of Health." These were the only diseases which the physicians were required to report.

Disinfection was performed by the use of a "formaldehyde lamp" furnished, so far as I could learn, through the Secretary, who is a druggist.

I then conferred with the Superintendent of Schools, Mr. J. W. Cooper, and learned that the pupils are assigned to schools according to the space in any one school building and in order of application for entrance. There is no division according to wards, hence a child from any one section of the borough may be found in any school building. There are eleven buildings, the majority having four or more rooms, under the care of seventy-seven teachers and having a total enrollment of 4030 pupils.

In addition there are five parochial schools with the following enrollment:

Stanislaus (Polish),	450
St. Catherine (Polish)	150
Greek Catholic,	75
German Catholic,	100
Lithuanian,	80
Total,	<u>355</u>

Superintendent Cooper receives from the Secretary of the Board of Health reports of communicable disease and distributes them to the proper school rooms for the public school system. Those to parochial schools are handled directly by those in charge.

For a month or more prior to this investigation Mr. Cooper has been rigidly excluding all suspicious cases and has practiced immediate dismissal of the school and prompt disinfection as soon as a case is either discovered in the school or is reported by the Board of Health.

The common drinking cup was abolished in October, 1910; individual cups have since then been in use. Each pupil has his or her own pencils and there is no collection or redistribution of these or of books. Slates were used in the primary grade but were abolished as soon as it was so suggested.

A public meeting on January 24th with T. R. Edwards, President of the School Board, presiding was attended by the Burgess, members of the Board of Health, the School Board, Councils, the Borough Engineer, the Solicitor, the Sheriff, ministers, physicians, lawyers and many others. By their invitation and as your representative, I addressed them on the general and essential points of public health administration, and reviewed the Acts of Assembly with reference to the responsibility of Borough Councils to maintain an efficient Board of Health, referring particularly to the provisions of the Act of May 14, 1909. I pointed out the conditions in their borough according to the data which I had collected during the day; informed them as to the methods of establishing efficient quarantine, and was asked many specific questions concerning the application of such measures. There was promised the immediate and unlimited support to all measures instituted. The Board of Health instructed their officers to carry out all instructions in detail and placed your representative in charge of the organization of all public health measures.

Despite the fact that the Street Committee had an appropriation of 15,000.00 for repairs, maintenance, cleaning, etc., none of the streets except a portion of the Main Street had been cleaned; there was a special appropriation of \$6,790 for the removal of garbage and ashes but there was no evidence that such removal was being carried out.

A special meeting of the Board of Health was held on January 26th during which the measures for the abatement of the epidemic were presented and the following authority was given to your representative: "That Doctor Hunt be and he is now authorized, empowered and directed to act with the Health Officer in any capacity and to any extent that he may see fit in dealing with diphtheria and scarlet fever now so prevalent in town," and to appoint Doctors S. C. Spalding, Chester Grubler and S. W. Blazewski as deputy physicians to establish the diagnosis in non-reported cases and to act in such other capacity as I should direct.

A comprehensive medical inspection of the entire borough and particularly in the third and fourth wards was begun, resulting in the discovery of cases in almost every ward. A careful analysis of the cases reported up to that date showed that 5.5 per cent. of the cases attended the parochial schools, 17.2 per cent. were in attendance on the public schools, leaving 77.3 per cent. unaccounted for as attend-

ing any school system. These figures were borne out by the analysis of the ages which disclosed the fact that nearly 60 per cent. were under school age and approximately 12 per cent. had discontinued school in order to take up some occupation. The release of 5,000 pupils to be cared for during working hours and under no restraint seemed inadvisable. The children seem to have so much better protection in school than at home that there was no necessity for closing the schools except for disinfection. A rigid inspection of every student for the evidences of sore throat or rash was carried out and all children with any evidence of illness were immediately returned to their homes and the cases reported to the local Board of Health. Mr. Cooper, the Superintendent, required certificates from a physician before he would permit the return of any pupil who had been absent more than 24 hours.

All but three of the cases reported in the borough were of the Catholic faith and the major number of them were foreign born. For this reason a conference was held at the residence of clergyman, C. L. B. Norton and your representative suggested that a circular letter be addressed to every householder, pointing out the measures necessary for the prevention of scarlet fever and diphtheria and asking the co-operation in detail, this letter to be printed in the predominant languages, that the clergy should enforce this by announcing the instructions from the pulpits and such other places as it would be possible for them to do so. These suggestions were gratefully received and further endorsed by a letter printed in the Evening Herald on January 25th, reading as follows:

"As a measure of prevention of the spread of the children's diseases now so prevalent in town, Dr. Hunt, representative of the State Department of Health, will in a few days issue a circular describing the precaution necessary to be observed. We earnestly urge the members of our congregations and all citizens of town to read and observe carefully the directions contained therein and in the meantime to obey strictly the orders of the officials of the Board of Health.

(Signed)

Rev. L. B. Norton,
Rev. John Godrycz,
Rev. Albinus Kaminskas,
Rev. Thomas Gremboski,
Rev. Francis Howath,
Rev. Francis Holtgreve,
Rev. Leo Lewicki."

These circulars were printed in English, Polish and Lithuanian, the translation being made by Miss Margaret Okiewicz, clerk in the State Tuberculosis Dispensary No. They were handed to homes already placarded by Health Officer Stanton and distributed in pews of both Catholic and non-Catholic Churches by the respective clergymen. The circular read as follows:

BOARD OF HEALTH.

To the Citizens of Shenandoah:

Fifty-five children have been taken sick with scarlet fever (scarletina or scarlet rash) and diphtheria (membranous croup) since January

first. A number have died. For this reason the Commissioner of Health of the State of Pennsylvania has sent a representative to aid in suppressing the disease.

It is important that the following be observed:

FIRST. All persons having sore throat, fever, rash on the skin, or any sickness not accounted for should consult the family physician at once.

SECOND. School children must have certificates from the physician if they are absent from school four or more days.

THIRD. The patient must be placed in a room not occupied by another person except the nurse. The latter must not cook for or come in contact with other persons. If this rule is not observed no one will be allowed to leave or enter the house.

FOURTH. Soiled bed and body clothing, cloths used for discharges from nose and throat and the patient's dishes must be disinfected by boiling for thirty minutes.

FIFTH. When the patient is discharged by the physician he or she must not be removed from his or her room nor receive visitors until disinfection has been performed and quarantine removed by the Health Officer.

The quarantine period for scarlet fever is 30 days, with an additional 30 days absence from school; and for diphtheria it is 21 days. Attendance at church, school, Sunday school, theatres, moving picture shows and all public gatherings is forbidden to those sick and to those living in the home of one sick with these diseases.

By Order of the Board,

MICHAEL L. SWEENEY, Secy.

January 28, 1911.

A similar conference was held with the Protestant ministers who consented to the same measures. There were present at this conference:

Rev. S. M. Dissinger,
Rev. N. C. Naylor,
Rev. J. A. Cooper,
Rev. Z. A. Zearick,
Rev. D. I. Evans,
Rev. W. H. Acornley.

These gentlemen gave their entire support to every measure which was being instituted but the possibility of extensive activity on their part was not great because of the few cases which were found among their congregations and Sunday Schools.

The superintendent of the public schools issued the following circular letter to the teachers:

"Teachers:—

At the meeting last evening, Dr. Hunt brought out the following:—

1st. That the order in reference to the public drinking cup be strictly enforced.

2nd. That no two pupils be permitted to use the same pencil. Hence, you will have, if any of you are in the habit of collecting the pencils, to be careful that the pupil gets the same pencil each day or permit the pupil to keep the pencil all the time.

3rd. That you must suspend any pupil of whom you are the least suspicious and all pupils so suspended must remain out until they procure certificates from a competent physician, setting forth that they and the family are clear of any contagion.

4th. That whenever a child has been absent four or five days you must have a certificate from a competent physician setting forth that neither the pupil or any member of the family has been affected by any contagion. Please enforce these four orders to the letter and send to this office a list of all pupils in your room who have been out since January 1, 1911, four or more consecutive days. State whether the pupil is in school now, when out and when said pupil returned to school.

(Signed) J. W. COOPER."

In order that the schools might co-operate with the Sunday, Parochial and private schools, and places of amusement, Superintendent Cooper issued the following circular letter, which was approved by the Secretary of the Board of Health:

"To the Clergy, Superintendents of Sunday Schools, Principal and Teacher of Parochial and other Private Schools, Managers of Picture Shows, Theatre and other places of Amusements.

Gentlemen:—As many of you were absent from the meeting of instructions held last Tuesday evening in the library room by Dr. Hunt, representative of the State Board of Health, I take this means to comply with what Dr. Hunt said. He directed:—

1st. That each of you be given a list of all contagious diseases reported.

2nd. That you exclude from your several Church Meetings, Schools, Entertainments all members of families afflicted and all persons residing in the same homes. Such exclusion to continue in Diphtheria for a period of twenty-one days and in Scarlet Fever for a period of (60) sixty days.

3rd. That you are required by law to enforce this exclusion and are held personally responsible if you fail to do so.

4th. You were requested to announce these matters at your several assemblies.

5th. The following is a list of the names sent to this office since January 1, 1911.

I am,

Yours truly,

(Signed) J. W. COOPER."

Approved by Board of Health.

M. L. SWEENEY, Secy.

Places of amusement which included one vaudeville theatre and two moving picture shows took every measure to comply with the regulations with reference to the exclusion of all persons from infected homes. In order that this exclusion should be emphasized the following notice was displayed on the screen between every film:

NOTICE.

"ANY PERSON ATTENDING THIS THEATRE
WHERE A CONTAGIOUS DISEASE EXISTS IN THE
FAMILY WILL BE PROSECUTED.
BY ORDER OF THE SHENANDOAH BOARD OF HEALTH."

It was necessary to establish absolute quarantine in practically every instance and enforce this by the use of guards. Upon request to John C. Groome, Superintendent of State Police, a patrol, consisting of a sergeant and four privates, was detailed for duty in Shenandoah. They rendered valuable service in maintaining quarantine and establishing a morale among the citizen guards which otherwise would not have obtained.

On the night of January 29th it was necessary to raid a premises where both scarlet fever and diphtheria existed and where a wedding party was in progress. In this action I was assisted by the State police and the local police force. Twenty-five persons, including the wedding party, guests, and orchestra, were sent home under guard and placed under ten days' observation quarantine. The State police rendered further assistance in securing evidence leading to the arrest and conviction of two Lithuanians for violation of quarantine regulations.

Subsequent to January 24th, on which date active measures to prevent the further spread of the disease were instituted, the number of cases rapidly diminished, as evidenced by the following tables:

TABLE V.
Morbidity.

				Diphtheria.	Scarlet fever.	Combined.	Total.
January	24th	to	31st.	7	19	4	30
February	1st	to	7th.	3	5	4	12
February	8th	to	14th.	1	2	0	3
				11	26	8	45

TABLE VI.
Mortality.

				Diphtheria.	Scarlet fever.	Combined.
January	24th	to	31st.	2	12	12
February	1st	to	7th.	0	2	0
February	8th	to	14th.	0	0	0
				2	4	2

During the last eight days of January thirty-six cases of mumps, one case of chicken pox and one case of measles were reported. It was evident that mumps had been as prevalent as diphtheria and scarlet fever but was brought under control within ten days.

The board of Health authorized the printing of all necessary forms for the use of Secretary and Health Officers) to conform to the recent Acts of Assembly and to the Department of Health. The officers of the Board were instructed to follow the suggestions made by your representative.

By your instructions, active control was withdrawn on and after February 15th, 1911.

This epidemic was noteworthy for many reasons; the constant increase in virulence; the large percentage of patients suffering from both diseases at the same time; the beneficial effects of diphtheria antitoxin in such cases and the low mortality; the high percentage of those contracting the disease at home and the low percentage in school. In addition the sociologic influences gave strong impress as a factor in the prevalence of disease.

INVESTIGATION OF VIOLATION OF QUARANTINE REGULATIONS IN JONESTOWN, LEBANON COUNTY.

In accordance with your instructions I visited Jonestown, Lebanon County, on February 9, 1911, to investigate the reasons that led to the refusal of disinfection on the part of the authorities in the German Lutheran Church.

The patient, Warren H., son of Wm. H., was in contact with a reported case of diphtheria on the premises of Thomas W. on January 15th. He developed his onset on January 22nd and on that day attended evening services at the German Lutheran Church. On January 23rd he waited on customers at the bar of his father's saloon until 10 A. M. when his physician, Dr. Frank Harris, saw him for the first time. A diagnosis of diphtheria was made and the patient was isolated in one room on the upper floor of the hotel. The diagnosis was confirmed at 10 P. M. and the premises placed under quarantine early the morning of January 24th.

The Board of Health, in an endeavor to prevent all possible source of contagion in the borough, ordered the disinfection of all public places. Every church in the borough had been disinfected except the German Lutheran Church, which had dissented from the order of the local Board. It is unfortunate that the local Board is opposed very largely on the ground that the President, Rev. J. S. Leinbach, is pastor of the German Reformed Church; he is a vigorous and well-informed man and will probably develop into an admirable public servant when he once is fully acquainted with the details of his office. The Secretary, H. C. Runyon, is treasurer of the Jonestown Hosiery Company and is an active, aggressive man. On January 31st they served a personal notice on the Rev. D. that the German Lutheran Church must be disinfected. It was refused in part for the reason above stated and also because they were fearful lest the method of disinfection may injure recent extensive decorations on the interior of their church.

After getting the facts in the case, I met with the Rev. — and the church officers, informed them of what I had learned and advised them to acquiesce and have the church properly disinfected; they asked me numerous questions concerning the method of disinfection, the possibility of injuring the interior, and laid particular stress on the possibility of avoiding disinfection by keeping the church closed for a period of a month or more to the general public but having it opened and exposed to the sunlight and fresh air. I informed them that the facts in the case were that the church had been exposed to infection, that they had been legally notified within the

proper incubation period limit for that disease and their only course was to comply with the law, as delay in opening the church would not prevent disinfection. They apparently acquiesced and it was agreed that the disinfection should be performed the same evening. I then met the members of the Board of Health and informed them of my action in the matter, advising them to have the Health Officer observe all precaution in the disinfection of this church and that it would be imperative for them to have the saloon of William H. and all of the public places where the patient had been prior to his isolation properly disinfected. They agreed to carry this out in detail. The saloon was disinfected the same evening. The father of the patient is not only the proprietor of the hotel but is also the Health Officer.

After returning to Harrisburg a telephone message from Mr. H. C. Runyon, Secretary of the Board, stated that the janitor of the church refused to deliver the keys and had absented himself in such a way that he could not be found. I suggested to him that in all probability the minister had the keys and that they should make demand for them. Later advices indicated that the Rev. D. had receded from his position and had made arrangements to have the church disinfected on Saturday, February 11th. However, nothing was accomplished by the Board and in response to their appeal I visited Jonestown on February 13th.

I met Mr. George D., President of the Church Council, and informed him that he and his brother officials were acting in defiance of the Act of Assembly of May 14, 1909, and read the penalty section to him. He promised to have a meeting of the Church Council the next evening; the Council consists of:

Trustees	Elders.	Deacons.
John Desh, Pres. Ed. A. Shaud, Thos. J. Leshner, George Bross.	T. J. Rank, Aaron Bloch, John Rodgers, Adam Shirk.	Thos. M. Bross, Chas. Hess, Harvey Geberich, Wm. H. Bohr, Secretary.

At this meeting, which was attended largely by the congregation, it was unanimously decided to refuse to comply with the order of the local health authorities but to surrender the key of the building only under protest and with the announcement that the Board of Health would be held responsible for damages. This action was largely the result of advice given by E. E. McCurdy, an attorney of Lebanon.

The key was surrendered and the church disinfected on February 16th.

REPORT OF THE LEBANON CITY BOARD OF HEALTH.

In accordance with your instructions I conferred with Dr. A. J. Riegel, President of the Board of Health of Lebanon, on February 9th in order to learn to what extent the Act of Assembly of May 14, 1909, was being complied with.

The following are the members of the Board: Dr. A. J. Riegel, President; Ira Spangler, D. D. S., Seth Light, M. D., Professor D. T. Warner and John C. Houck, Esq. The last three named gentlemen were appointed a committee to revise the rules and regulations on April 26, 1909. They have had one or two meetings as a committee but have done practically nothing toward revision. Dr. Riegel has taken the matter up with the Mayor and it has also been placed before the President of Councils but no action has followed. The Secretary of the Board, Elon Kehler, receives a salary of twenty-five dollars per month, and Health Officer Dr. E. H. Gingrich, thirty-five dollars per month.

Lebanon is a third class city and has a population of 19,240, according to the census of 1910. "The Rules and Regulations of the Board of Health of the City of Lebanon" promulgated in 1899 are still in force and, according to the officers of the Board have not been amended or altered since that year. The contents define "Nuisances" and make provision for abatement; provide for the control of "Malignant Disease" which are further defined as "Contagious Disease" or "Infectious Disease" and are taken to mean the following: Scarlet Fever, Diphtheria, Smallpox, Cholera (Asiatic or Epidemic), Yellow Fever, Spotted Fever (Cerebro-Spinal Fever), Relapsing Fever, Tuberculosis, Leprosy, Erysipelas, and also any other disease publicly declared by this Board to be dangerous to the public health; the reporting of Births, Marriages and Deaths; for the sanitation of Stables, Slaughter Houses, Hog Pens and Privies; for the prevention of the sale of Adulterated Milk and Unwholesome Food; the lodging of Complaints; and it outlines the duties of the Health Officer and Secretary and also provides a penalty for violations.

It was stated to me by both Drs. Riegel and Gingrich that many cases of communicable disease exist almost constantly throughout the year which are not reported or treated by quarantine methods. I was informed that the only diseases reported, placarded and followed by disinfection were diphtheria and scarlet fever.

By your instructions I met with the members of the Board of Health of Lebanon on February 13, 1911. This meeting was attended by every member of the Board, the Health Officer and the Secretary. It is the first meeting of the Board which has been fully attended for a period of nearly two years. The essential facts which they de-

sired were with reference to what would properly be incorporated in the rules and regulations, which they desired to draft immediately, by the Committee which had been appointed in April, 1909, for that purpose.

Mr. Houck of that Committee, who is an attorney-at-law, was the spokesman for the Board of Health and stated that proper rules and regulations would be drafted immediately, and asked whether they could be submitted to you for approval. I stated that you would be very glad to do this for them; that you particularly desired that the Act of Assembly of May 14, 1909, should become operative immediately. They informed me that the details of that Act as well as the rules and regulations of the State Department of Health would be in force in their city at once.

The remainder of the time spent with them was devoted to answering numerous questions as to local administration.

REPORT ON AN OUTBREAK OF EPIDEMIC DYSENTERY AND PARATYPHOID FEVER AT ISELIN, INDIANA COUNTY.

In accordance with your instructions I visited Iselin, Young Township, Indiana County, on February 25th, 1911, in order to investigate the prevalence of diarrhoeal disease in which the possible diagnosis of cholera had been made by the attending physicians.

This town, which is not incorporated is one of the numerous coal towns of the Pittsburgh Gas Coal Company and is located in the southwestern part of the county close to the Armstrong County line; it contains 216 houses and has a population of 2,700 according to the last census, the majority of the inhabitants being non-English speaking. The town is in every detail controlled by the Coal Company, which is a subsidiary of the Buffalo, Rochester & Pittsburgh Railway Company, and for which road it is a terminus. It is located on the side of a hill which slopes somewhat precipitously on the southern side toward Hooper's Run, a small stream which flows in a southeasterly direction, to empty its waters into Blacklegs Creek; the latter by means of the Kiskiminetis Creek is tributary to the Allegheny River.

WATER SUPPLIES: The Company has an intake dam on Hooper's Run south of the town. A filtration system was established some years ago, prior to the incumbency of Engineer J. E. Ashbough, who had been in charge for six years. The intake is from a dam on Hooper's Run, south of the town, and gravitates through a twelve-inch pipe to the filter plant nearly one-eighth of a mile to the northeast. The water is filtered by means of a Pittsburgh filter, from

which it is pumped to a wooden reservoir on the hill north of the town, from which it gravitates to the town use. The period of subsidence is undetermined but probably lasts for more than eight hours. There are facilities for every house to procure this water. However, the residents prefer to use spring supplies of which there are six within the town limits. Only one of the springs is protected; this tabulated (according to its geographic position) as Spring No. 1, is located under a piggery and chicken yard but is said to have cement walls and cover, a pipe carrying the water to a point thirty feet away where it can be caught in an open vessel; this water is said to be clouded every time there is storm water on the ground surface. Two of the springs have been excavated to a depth of four to six feet, the water being procured by small "pitcher" pumps. The remaining three are unprotected. The intake dam is somewhat protected by an open ditch, however, is insufficient in times of even ordinary storms; eight or ten open privies are located on the side of the hill above this ditch.

There is no sewage system, the only method of disposal being by outside privies, the majority being overflowing, even over the seats. The vaults for the most part were dug three years ago, are about four feet deep and in hardpan—as a result, they soon fill up. All new vaults are dug to a depth of eight or ten feet.

Garbage of all descriptions and animal dejecta is present everywhere, streets, yards, and even in kitchens. Lime is freely used but serves no purpose; only cart and shovel can accomplish results in this community.

Typhoid fever has been more or less constantly present though not reported because for the most part atypical and many of the cases are sent to the Adrian Hospital, Punxsutawney, Jefferson County. The following records are obtainable:

1909,	10 cases
1910,	9 cases
1911—	
January,	1 case
February,	27 cases
March,	29 cases

The physician for the Coal Company at this point is Dr. C. B. Cranmer, who is assisted by Drs. F. B. Stevenson and E. L. McCandless. In addition they have under their care the inhabitants of five other coal towns and considerable country side work.

The first case came to the attention of Dr. Cranmer on February 1, 1911, in which he made the diagnosis of typhoid fever, since which date twenty-seven cases have been reported, five of them being outside of that immediate community. Three have already been sent to the Adrian Hospital, leaving a total of nineteen cases which were studied in company with Dr. Cranmer.

Of seven cases which he had already reported as being typhoid fever, a positive diagnosis on the clinical phenomena was made in one and the other six were held under advisement pending a report on the specimens of blood which were sent in to the State Department Laboratories. These seven cases presented a prodromal stage of from six to fourteen days, the onset being marked by chilly sensations, some evidence of rise of temperature in the evening and frontal headache. At the time of examination but one showed a typical roseola on the abdomen with enlarged spleen. In the other six there was some tenderness in the splenic region but no positive enlargement could be detected. All showed temperature which, being taken but once, the proper curve could not be studied; the maximum noted was 103.3.5 F. Dicrotism was positively diagnosed in five of the cases and in all there was the suggestive appearance of the tongue—thick, white to yellow fur in centre, with smooth red edges and tip.

In the other twelve cases the general history was that of a decidedly abrupt onset, but two having had temperature when seen on the first visit by Dr. Cranmer, at no time recording over 101, and within twenty-four hours becoming either normal or sub-normal. At the time of onset there was either nausea or vomiting, anorexia and marked diarrhoea, in many cases propulsive in type. The exact history of the number of stools in twenty-four hours could not be obtained as no record was kept by the patients, but, the frequency indicated by the general history would indicate that in many instances there were twelve or more in twenty-four hours. Blood was noticed in only one case (the first one reported) and in this case death occurred a few days after the onset of illness. The typical rice water stools occurring in cholera were not observed. Mucus was not observed in any case. In those cases in which subnormal temperature was noted signs of marked prostration were early, many cases approaching total collapse, especially of the circulation. Of the three cases in which death occurred one was a man whose general symptoms were not those of a true typhoid fever and who had intestinal hemorrhage; the other two were in pregnant women who aborted on the third and fourth days of the illness, dying the day after the abortion.

Further analysis of the nineteen cases elicited the following facts:

WATER.

Springs and wells,	16
at 212 and 215	
Company supply and springs,	2
Springs and well,	1
Total,	19

MILK.

9 Various supplies,	9
No milk used,	4
W. C. Fulton, (farmer),	6
Total,	19

VEGETABLE AND FRUITS.

Company store only,	5
Company store and Mike Miller,	14
Total,	19

ICE AND ICE CREAM.

None used.

CONTACT.

It was almost impossible to discover the exact extent to which contact may have had a part in the distribution of the disease; contact is intimate but the period within which the cases were reported is so short that it suggests that it played little or no part. In one house seven cases became ill at practically the same time, all with abrupt onset and marked with gastro-intestinal phenomena.

Dr. Cranmer was of the opinion that distribution of fruits and vegetables by one Mike Miller, who lives at the Y., which is about one-fourth mile from Iselin, was responsible for the spread. Mr. Miller is an Italian and is on a friendly footing with those who are ill, both in Iselin and the three cases in Big Run. For this reason a special visit was made to see Mr. Miller at the Y. His cousin, Pregno Luigi, had arrived from Belaire, Ohio, during the middle of January and had been residing at Miller's home fifteen days before he was taken ill, the first date of illness being February 11. This patient prior to his illness had been delivering fruit to some of the customers of Miller's but the only fruits handled at this time were lemons, oranges, cabbage and potatoes. Miller had thirty-five or forty families on his list of customers, all of whom had purchased from him during the past months. A positive history that Luigi had delivered to the homes where illness had afterward occurred could not be positively ascertained. Luigi died on February 17th, the diagnosis of typhoid fever not having been made. Mrs. Mike Miller was taken ill on or about the same time that Luigi became ill and ran a course which was more suggestive of typhoid fever. She is convalescing at the present time. It was learned that she had frequently visited Iselin and in all probability both she and Luigi had used water from the springs in that place. From the various patients seen no history of having used raw vegetables could be obtained. Oranges had been eaten by several but it should be noted that only one child was taken ill; oranges in large quantities were usually purchased for the children.

Three cases at Big Run, about one and one-half miles distant, were not studied. Dr. Cranmer states that all were of the diarrhoeal type with abrupt onset. All cases were friends of the Iselin Italian cases with whom they frequently interchanged visits.

LABORATORY EXAMINATIONS. Specimens of stools from eight cases were studied for cholera vibrio only with negative results.

The agglutination reaction of the blood from seven cases was studied with *B. typhosus*, *B. paratyphosus* A. and B., *B. paracoli* and *B. enteritidis*. All specimens were negative to all micro-organisms except *B. paratyphosus* B., which was positive in 1:40 dilution at the end of one hour.

The water analysis follow:

	Total bac. per c. c.	<i>B. coli</i> per c. c.
Company supply tap,	1,200	0
Company supply tap,	60	0
Spring No. 1,	{ 1,400	8
Spring No. 2,	{ 2,000	60
Spring No. 3,	{ 10,800	0
Spring No. 4,	{ 14,000	16
Spring No. 5,	{ 48,600	0
Spring No. 6,	{ 5,400	0
Spring No. 7,	90,000	50
Spring No. 8,	50,000	300
Spring No. 9,	{ 5,400	1
Spring, railroad station,	{ 28,000	50
Well No. 1,	2,000	0
Well house No. 212,	1,000	0
Well house No. 203,	500	0
Well No. 2,	140	0
Well No. 3,	200	0

DIAGNOSIS: This outbreak was without doubt due to a spring water supply polluted by direct drainage from hog-pens, chicken yards and more remotely privy vaults. The diagnosis of the early cases, in all probability, should be Epidemic Dysentery, due to dysentery forms of micro-organisms of the typho-colon group. It is also probable that the *B. enteritidis* was largely responsible for the earlier infections. The later cases were mixed infections by *B. typhosus* and *B. Paratyphosus*.

MORTALITY: Of the 57 cases reported during January, February and March there were 14 deaths—a mortality of 24.5 per cent., 4 of the 7 cases diagnosed serologically as paratyphoid B. infections are included in the total mortality.

ACTION AND RECOMMENDATIONS. It was required under the authority invested in the Commissioner of Health (Section 8, Act of April 27, 1905, P. L. 314), that all cases infected by pathogenic members of the typho-colon group should be reported as typhoid fever for the purposes of sanitary supervision. This is the first occasion in the history of the State Department of Health that such action has been taken.

The Company officers and physicians and the residents were warned to discontinue the use of the spring water supplies; all springs were placarded with the Warning Notice, Form 642.

The Company agreed to require and to arrange the sanitary disposition of garbage, to abate all overflowing privies and other nuisances, and to furnish lime for disinfection purposes. The Pittsburgh Gas Coal Company is said to be active in correcting insanitary conditions in the coal towns of the Company but has been discouraged because of lack of appreciation and co-operation on the part of the employees.

It is advisable to obliterate the springs in this particular coal town or to conduct the water by means of underground drainage to such point as to make it inconvenient for use. There is no possible correction to be made within the town which will prevent the continuous reinfection of those sources of water supply. The public supply is unprotected in so far as the ditch below the line of water closets in the south side of the hill would not prevent sewage from being washed from this point into the intake dam of the filter plant.

REPORT ON TYPHOID FEVER CONDITIONS AT DANVILLE, MONTOUR COUNTY.

In accordance with your instructions, I visited Danville, Montour County, on February 27th and 28th in order to investigate the prevalence of typhoid fever in that borough.

Danville is a manufacturing borough situated on the north branch of the Susquehanna River; eleven and one-half miles above the junction of the north and west branches. The population, according to the census of 1890 was 7,998, of 1900, 8,042, of 1910, 7,517. This decrease in population is accounted for by the centralization of the iron and steel industries, large branches of which were formerly operative in this borough. It is surrounded by Valley and Mahoning Townships, Montour County, throughout which extensive farming is carried on. Farm products are sold at the curb market twice each week and there is little or no sanitary supervision of food products; a market master is maintained but his duties are confined chiefly to the ordinary refractions and violations of weights and measures and the collection of fees for stands.

WATER SUPPLIES: The present water system was installed September 13, 1873, the supply being taken from the Susquehanna River through a filter crib located just below the bridge leading to Riverside (South Danville) which is about 50 feet from the shore line. The

average consumption is one and one-half million gallons during each 24 hours. In 1895 three gravity mechanical filters of the Moss-Jewel type were installed. They are said to have a capacity of one and one-half million gallons and under forced service have a capacity of two million gallons during each 24 hours. The raw river water is pumped from the intake crib to a sedimentation tank where there is probably some 20 minutes subsidence. Solutions of alum are applied at the point of intake and the sediment is collected and discharged at the bottom of the tanks to the river. There are no automatic regulating valves or rate controllers. The washing of the filter beds is performed by the engineer in charge of the plant. The great majority of residents permanently use the public water supply. There are, however, several small private supplies, 21 individual wells and 18 springs.

SEWAGE DISPOSAL. There are probably some 5 or 6 miles of sewerage pipe, it being impossible to determine accurately the length or the points of discharge. There are two common outlets into the Susquehanna River, one just below the pumping station and the other several hundred feet down stream from that point. The major number of private and small sewers empty into the Mahoning Creek which is a tributary to the Susquehanna River one mile below the pumping station of the borough water works; into the bed of the old Pennsylvania Canal, particularly the storm sewers, and into other tributaries, such as Sechler and Blizzard Runs, both tributaries to the Mahoning Creek. One private sewer, maintained by the Gertner Brewery, has its outlet into the Susquehanna River about 100 yards above the intake of the water works and some 50 or 60 feet from the shore line. In addition to the sewage system there are some 50 cesspools and 1,500 privies in use.

From the point where the Gertner Brewery sewage discharges into the Susquehanna River, as one travels east along the river shore the bank becomes less precipitous and shelves out to flat levels and some meadow land at the extreme eastern limits of the town. In this territory it is common to have the waters of the river overflow to such an extent that streets, cellars and privies are inundated. The river has been sufficiently high during the spring and fall of each year to carry the overflow from the privies along the river shore and there is also sufficient declivity for storm water to be a factor in washing this sewage into the river.

The State Hospital for the Insane occupies a tract of land in Mahoning Township adjoining the borough line. Prior to 1891 the sewage from the hospital was, in part, discharged into the river and in part was deposited on the fields. In 1891 the sewerage lines were extended down the river to a point below the Danville Water Works.

However, that deposited on the fields for a portion of the surface drained into the waters of Toby Run which empties into the Susquehanna River above the water intake of the Hospital itself. A sewage line was also maintained which discharged into Hospital Run which emptied into the Pennsylvania Canal. A sewage disposal plant was installed during 1908 since which time the effluent has been discharged into the Susquehanna River. The hospital's water supply is received from the river and is purified by mechanical filters said to have a capacity of one million gallons daily. It was not possible to determine the sedimentation period but it is considerably longer than that in the borough system.

Dr. Cameron Shultz, the Secretary of the local Board of Health, supplied me with a list of six cases, which had been reported to the Board since January 1st, 1911, but informed me that he had reason to believe there were numerous cases in which no positive diagnosis had been made and requested that I make such investigations as may be necessary in order to determine the exact number of cases and the probable source of the infection. In the work subsequently accomplished, I was accompanied by Dr. George A. Stock, County Medical Inspector, who rendered much valuable assistance in the investigation.

I called on the practicing physicians in the borough and secured from them a list of the cases which they had reason to believe may be typhoid fever but which they had not yet reported, and also secured their permission to make such examinations as may be necessary in order to determine the diagnosis.

The presence of typhoid fever in the borough as indicated by records, gives the following cases and deaths since 1891—a period of twenty years:

1892—	8	cases—	3	deaths.
1893—	7	“	1	“
1894—	4	“	0	“
1896—	5	“	0	“
1897—	9	“	1	“
1898—	8	“	3	“
1900—	3	“	0	“
1901—	3	“	0	“
1902—	4	“	1	“
1904—	26	“	1	“
1905—	13	“	1	“
1906—	38	“	4	“
1907—	71	“	7	“
1908—	38	“	1	“
1909—	24	“	4	“
1910—	24	“	3	“

It is possible that these records are not accurate as there is considerable evidence that many atypical cases existed and, further, that a large number of "sporadic cases of dysentery" associated with slight febrile course and considerable malaise extending over a period of some days are more or less constantly present. There is reason to believe that this condition is practically endemic and has been so long continued that it is tolerated as unavoidable. In other words, we have reason to believe that there have been many infections by lower members of the typho-colon group which have not been diagnosed as typhoid fever or as epidemic dysentery and in the majority of instances of the milder cases physicians have not been called. It is relatively common in the community to have "malaria" (not true malarial fever) without the attendance of a physician, while many persons were suffering with what was diagnosed as catarrhal fever. The major number of cases diagnosed as typhoid fever occurred during the late fall and winter months.

A conference with Dr. H. B. Meredith, Superintendent of the State Hospital for the Insane, indicates that diarrhoeal diseases have not been prevalent at the State Hospital, either among patients or employees. There have been relatively few cases of typhoid fever in the total institutional population of 1,500. One case is reported in September, 1910, whose infection was traced to Danville Borough where she was accustomed to drink water. The records of typhoid fever occurring in nearby townships are as follows, including the one referred to above occurring in the State Hospital for the Insane, two other cases were reported for Mahoning Township, both of which can be charged to infection in Danville. But three other cases have been reported for 1910 for Montour County, all of them in townships remote from Danville but among individuals who frequently visited Danville.

The completed list of cases diagnosed as typhoid fever in the borough at the time of investigation totalled 19 and the analysis associated with general facts in relation to the public water supply formed the basis for conclusions as to the source of infection.

ONSETS.

Jan. 4.....	1	Feb. 8.....	3
Jan. 17.....	1	Feb. 9.....	1
Jan. 30.....	1	Feb. 11.....	1
Feb. 1.....	1	Feb. 12.....	4
Feb. 4.....	2	Feb. 14.....	2
Feb. 5.....	1	Feb. 17.....	1
Total, .....19 Cases.			

AGES.

0 — 4.....	3	25 — 29.....	2
5 — 9.....	5	30 — 34.....	0
10 — 14.....	2	35 — 39.....	1
15 — 19.....	5	40 — 49.....	0
20 — 24.....	0	Over 50.....	1
Total, .....19 Cases			

SEX

Males,	8	
Females,	11	
	Total,	19 Cases
Primary cases,	19	
Secondary cases,	0	
	Total,	19 Cases

WATER

Borough water,	17	
Borough water and Nail Mill Spring,	1	
Borough water and bored well,	1	
	Total,	19 Cases

MILK.

Of the 19 cases, 18 obtained milk supply from 12 different dairymen—
One case used no milk.

BUTTER.

The butter supply was obtained from 2 cream-
eries and 10 farmers for 18 cases; 1 from home
manufacture.

Total,19 Cases

SHELL FISH.

3 Cases various sources.
16 Cases none.

Total,19 Cases

VEGETABLES AND FRUITS.

7 Cases—yes—from 6 sources.
12 Cases—No.

Total,19 Cases

ICE AND ICE CREAM.

BLOOD EXAMINATIONS.

Specimens were obtained from 8 cases which showed ill defined
symptoms. The agglutination reaction of these bloods was made only
with *B. typhosus* and all proved positive. The diagnosis of the 11 other
cases was not questioned.

It had been asserted by many of the better business class of men
that in case of fire there had been direct pumpage from the Susque-
hanna River. This, however, has been denied by the day engineer
on duty at the time of investigation. It is stated, however, with
the connection of the borough mains this would be possible. He
washed out the filter beds repeatedly during the investigation
enabling me to make a gross examination of the water before and
after washing out the filters. Before washing the water was slightly
opaque; for at least 20 minutes after being washed the filtered

water was markedly opaque and contained considerable organic material. The water analyses follow:

	per c. c.	
	Total.	B. Coli.
Raw river water, 100 yards above intake,	900	12
Raw river water, elsewhere,	100	1
Effluent from filters, $\frac{1}{2}$ hour after cleaning,	280	12
Effluent from filters, 1 hour after cleaning,	10	0
Sedimentation tank (Surfaced),	48	0
Taps:		
Pump house,	20	1
City Hotel,	24	1
608 Mill St.,	720	2
300 W. Mahoning St.,	120	0
339 Ferry St.,	50	2
400 E. Front St.,	420	0
311 Pine St.,	84	0
508 Church St.,	600	0
3 C. St.,	40	0
245 Ash St.,	48	0
549 Railroad St.,	20	0

At the time of collecting samples the river was as its normal height and so far as could be discovered there had been no preceeding storms on the water shed sufficient to cause unusual changes in height or flow. However, there exists a marked tendency to charge the existence of typhoid fever to the change in sewage disposal at the State Hospital for the Insane. For this reason the analysis of the effluents and water receiving such effluents from the sewage system is given.

B. Coli per c. c.

	Jan. 14	Jan. 21	Jan. 28	Feb. 4	Feb. 13	Feb. 18	Feb. 25.
Raw sewage,	100,000	150,000	70,000	150,000	17,500	42,000	88,000
Eff. Septic tanks,	25,000	21,000	17,500	23,000	31,500	15,000	42,000
Eff. Sprinklers,	17,500	0	7,000	16,000	0	10,500	13,125
Eff. Settling tanks,	0	11,200	0	0	0	0	0
Sample of stream,	0	0	0	0	0	0	0
Sample of river,	24	0	0	0	0	0	0
Sample of drinking water,	0	0	0	0	0	0	0

Based on this investigation the following recommendations were made to the Secretary of the Board of Health, that, first, warning notices should be issued to the public that all water used for domestic purposes should be boiled for at least 20 minutes that more active segregation of the patients from contact with other members of the house; that they should see that thorough disinfection of the discharges should be required in every instance—up to this date the matter had been left to the attending physician; that circulars on

typhoid fever (Form No. 2) issued by the State Department of Health would be supplied for temporary use and that a copy of each be distributed to each household where the disease existed by the officer of the Board; that the physicians should be encouraged to send samples of blood to a competent laboratory in order to assist in diagnosing atypical cases.

I would respectfully recommend that an engineer for the Department make a thorough investigation of the efficiency of the filtration system now in use in that borough in order that the necessary recommendations for changes may be made to protect the public health of the citizens from water borne disease.

REPORT ON POLIOMYELITIS IN ANTHONY TOWNSHIP, LYCOMING COUNTY.

By instructions, received through Dr. B. Franklin Royer, Chief Medical Inspector, I proceeded from Danville, Montour County, to Anthony Township, Lycoming County, on February 28th, in order to investigate four cases of alleged Poliomyelitis occurring in that township. I was accompanied by Dr. W. C. Youngman, County Medical Inspector, Williamsport, and by Dr. J. E. Schaefer, the attending physician, Cogan Station.

The family in which the cases occurred is that of Joseph B., a farmer of small means; it consists of Mr. and Mrs. Joseph B. and seven children, aged respectively sixteen, fifteen, eleven, nine, eight, six and five years.

For the number of persons the house is very small and is in very close proximity to the barn, poultry houses, and other outbuildings. There is no stagnant water of any sort except in the vicinity of a drinking trough for cattle just below the barn. An open stream flows from a spring on the hill side down to this trough and is deflected away from the immediate property by a rise in the land. Except for some maple, hickory, and some fruit trees there is little or no shrubbery immediately near the house. The sewage is disposed of by an outside closet which is unprotected. The garbage is transferred to the piggery. Water is secured from a dug well, probably thirty-five to forty feet deep, which is insufficiently covered and is located immediately outside of the kitchen door. No ice is used by

this family. Their food consists of potatoes and cabbage, salt meats for the most part, and milk is obtained from their own cow. Raw fruits and vegetables are not used except during the Summer time. They have cattle, horses, chickens, cats and dogs on the premises, all having been in their possession for over a year and, so far as known, having been free from disease. They observe mice frequently but not in excess. At the time of the year this examination was made there were no insects of any type found about the property but in the Summer time it is customary for them to be troubled with all kinds of flies, roaches, spiders and mosquitoes.

The first case, Christian, aged fifteen, was taken ill on January 25th, 1911. He had been in attendance at school on that date though complaining of marked tenderness especially of the lower extremities on the day before. On the date of onset he developed some fever and had difficulty in walking because of inability to raise his feet; he interpreted this in terms of stiffness and was located in knees and ankles. He was troubled with headache for only one day, at which time there was a moderate amount of anorexia. On the day of onset the face became very much swollen and there was considerable darkening of the tissues immediately under the orbits. This was soon followed by swelling of the legs, feet and hands. During the days that followed he noticed that the swelling was worse in the morning and that it "wore away toward night." The tenderness at this time in the lower extremities was marked. Pain was present only when attempting to walk. Dr. Schaefer saw him one week later, at which time the swelling had considerably lessened but it was found to be a true odema, pitting on pressure especially over the legs and feet. The only indication of paralysis was the dragging of the feet with some considerable foot drop. There seemed to be no cardiac or febrile condition. During this early stage of his illness he urinated once at night but did not notice that there was excessive urine at any time. From the date Dr. Schaefer saw him he progressed rapidly and at the present time is free from any symptoms of illness. Unfortunately no urine examination was made in this case.

The examination by your representative on February 28th, showed the boy to be a well built, stout, healthy looking lad, large for his age, without evidences of recent illness. An examination of the eyes, tongue, chest and abdomen gave negative results. Superficial and deep reflexes were normal in character. The boy does not tire easily but still seems to have slight difficulty in raising the toe from the ground; this is equally marked on both sides. There is no ataxia and the station is good. Babinski, ankle clonus, and Kernig were negative. It is to be noted that there is a history of some fever early in the onset. There has been no abnormality of temperature since he has been under the observation of the attending physician.

Bessie, aged nine years, became ill on the same day as Christian, with stiffness, considerable tenderness in the lower extremities but with markedly less swelling than her brother. The face was far less involved. She had some difficulty in lifting her feet from the ground and for a few nights was troubled with nocturnal urination. No fever was noted in her case either by the family or the attending physician. An examination of this case gave negative results throughout. There is no evidence of peroneal loss of power at the date of examination.

The general history of these two cases is similar. Both attended the same school, drank from the same water supply, had food from same sources, had been in contact with the same persons up to the time of becoming ill, when both were taken ill together. There is no history of either constipation or diarrhoea, of either ocular or aural disturbances. Both showed considerable irritability when sleeping and complained of the same symptoms when awake, with the exception that the peroneal loss of power was somewhat less in Bessie, and only Christian gave a history pointing to involvement of quadriceps extensor muscles.

Mary, aged eleven years, sickened on February 3rd on which date she was immediately put to bed. She had had some signs of swelling involving all four extremities, with considerable tenderness, stiffness and pain on the night before. Dr. Schaefer saw her on the day she became bedfast and found her temperature to be 101 degrees; it varied from 100 degrees to 101 degrees for a few days with a proportionately increased pulse rate and with some signs of mild bronchitis. The swelling became so marked that he made an examination of the urine for albumen four or five days after the onset and found a considerable amount present. "No casts were noticed." The patient complained of considerable ocular disturbance, stated that in reading the "words jumped together." She also was troubled with paresthesia, especially in the lower extremities during the first week of her illness. On examination Dr. Schaefer found that her extremities were rigid to movement but were totally without power. No voluntary movements could be executed by the patient and passive movements of extension and flexion showed marked stiffness and elicited considerable pain. The child's mental state was that of marked irritability, followed by delirium after forty-eight hours, which continued for two or three days. Since that time the child has been apathetic.

The examination showed the patient in comparison with her age to be of normal stature, markedly pallid, and approaching albinism in type. *Pupils* somewhat dilated, hyper-active to both light and distance tests; fixation normal, no signs of nystagmus. *Tongue* clean, moist, protruded in midline; no tremor. *Chest*: The lungs were negative. The heart shows some slight accentuation of the

second aortic sound but otherwise is negative. *Abdomen:* Moderate degree of tympany; tenderness in splenic region and over left iliac fossa. The spleen is palpable and seems to be slightly enlarged to percussion. This patient's stools are said to be normal in number but contain considerable mucus, are green colored and of a foul odor. *Lymphatic system:* The lymphatic glands were found not to be enlarged in any area. *Extremities:* The upper extremities showed marked loss of power especially to movements of the deltoid muscles, some residual stiffness to movements of flexion and extension. No signs of swelling at date of examination. The lower extremities were still so tender that it was necessary to give protection from the bed clothes by using a tent. The odema is marked, pitting on pressure being present from the knees down. There is loss of power on both sides. *Reflexes:* The deep reflexes were slightly plus in the lower but apparently normal in the upper extremities. It was difficult to make a good examination of the deep reflexes because of the inadvisability of having the child sit upright. Baginski was negative, the plantar reflex being somewhat sluggish. Abdominal reflex was lessened. Ankle clonus was absent. At date of examination the child's temperature was 99.2-5 and the pulse which was 96 had a moderate increase in tension but otherwise was negative. There was no disturbance of sensation other than marked hyperaesthesia; some rigidity of the spine and a partially developed Kernig sign.

Mrs. Annie, aged thirty-one years, became ill on February 8th. The first symptom noted was swelling of the face with some discoloration of the tissues under the orbits. At time of onset was somnolent, later replaced by delirium. This was soon followed by a staggering gait with an almost total loss of vision for temporary periods. She suffered no pain but there was marked tenderness all over the body, worse in the legs and apparently equal on the two sides. There was no swelling of the legs or arms at any time. She complained at this time of muscae volitantes and is said to have had "separation" of the eyes, this being noticed by members of her family. She had some headache. Somnolence was marked up to onset of paralysis when she became more or less delirious, this condition lasting six or seven days. It was observed that her speech was somewhat thickened and she complained of stiffness of the tongue. There was no difficulty in swallowing. Within twenty-four hours there was total loss of power in the left arm and leg and to a much less extent in the right arm. The head could not be held erect because of loss of power in neck muscles. For a period of three days she had increase in temperature, the highest being 100.2-5 F., with a proportionate increase in the pulse rate. On or about February 20th she was examined by Drs. Youngman and Schaefer. They found flacid paralysis in the affected extremities. At this time the mental state was ex-

tremely apathetic and though the patient complained of no symptoms she had still an almost complete loss of power on the left side.

The examination on February 28th showed the patient to be a woman of rather slight build, medium height, pallid, with a markedly dulled expression. The *pupils* were somewhat contracted, were equal, showing no response either to light or distance in either eye. The internal recti muscles were totally inactive, there being no attempt to fixate; vision was unimpaired to rough tests; some tendency to an exophoria; rotation impaired in so far as the internal recti muscles were involved; no nystagmus. The *tongue* was protruded in midline, no tremor, clean. The facial muscles showed no paralysis or loss of power. *Extremities*: The patient is right-handed. There was notable relative diminution of power on the left side without ataxia or spasticity. No particular group of muscles on the left side of the body seemed to be involved, there being the same relative diminution to pronation and supination as to extension and flexion. *Chest*: The lungs were negative. The heart showed well defined accentuation of the second aortic sound but no murmurs. *Abdomen*: The spleen was palpable and was distinctly enlarged to percussion. She has had no tenderness in the splenic region since the early part of her illness. Gall bladder and liver were negative. There was no tympanites. *Reflexes*: The deep reflexes were active on both sides and excessively so in the affected extremities. The abdominal reflexes were normal on the right side, were totally inactive on the left. There was a marked and well defined Babinski reflex, equal on both sides. The ankle clonus was positive and marked on both sides. Stereognostic sense was present. Pain and thermal sensation seemed to be unimpaired except that there was considerable delay when the examination was first made; this seemed, however, to be due to the apathetic condition of the patient's mentality for on second examination after having explained to her in detail what was being done, the response was prompt and accurate. The gait was slow and uncertain, with considerable foot drop on the left side. The station was very poor.

A diagnosis of acute poliomyelitis of all four cases was made. The basis for such diagnosis is found in the following features, in part common to all four cases—the age of the cases, the family association, the incubation period for the third case of eight days and for the fourth case of five to twelve days; the abruptness of onset, with symptoms common to all four, viz: fever, headache, slight nausea or anorexia, tenderness (most marked in the lower extremities) the early and rapid onset of flacid paralysis (common to the first, second and fourth cases) transient and peculiar in distribution.

The first two cases are of the peroneal type, with some involvement of the quadriceps extensor in one (Christian); the third case

(Mary) showed more signs of the meningeal type as evidenced in the more marked hyperaesthesia, pain, rigidity and positive Kernig sign; the fourth case (Mrs. B.) probably is of the pontine type—the partial ophthalmoplegia, delirium, and more grave general phenomena, suggesting that the preponderant lesions are in the pons and upper cervical segment of the cord.

No previous cases have been reported from this township and only one rural case from the county, which was very remote, with four cases in the City of Williamsport. No association with other cases or persons in whose relationships this disease is known to have existed, could be discovered.

REPORT OF INVESTIGATION OF TYPHOID FEVER IN MARIANNA, WASHINGTON COUNTY, MARCH, 1911.

In accordance with your instructions I proceeded to Marianna, Washington County, for the purpose of investigating the unusual prevalence of typhoid fever, arriving there on March 17th. I was accompanied by Engineers W. H. Ennis, R. E. Irwin and R. B. Styer, and Sanitary Inspectors R. M. Souder and L. S. Imler. A preliminary investigation had been made by County Medical Inspector, Dr. C. B. Wood, of Monongahela, who reported 28 cases and one death.

Marianna was incorporated as a borough in February, 1910, being organized from West Bethlehem Township. It is located in the south-eastern portion of Washington County, and is a bituminous coal mining community of nearly 2,000 population—according to the census of 1910, 1363. The town was built and (as incorporated) is largely under the direction of the Pittsburgh-Buffalo Company, a coal mining and coke manufacturing company. They employ over 900 employees in the mines and 160 at the coke ovens.

The borough is divided into two portions by the north fork of Ten Mile Creek, the principal portion being on the north side of the stream. The section of the country along the banks of the stream is flat, is covered by the shops, shafts and boiler and engine houses of the Company. The ground rises with a sharp elevation to the northward and southward, the highest point occupied by dwellings being some 300 feet above the stream. Ten Mile Creek rises from various sources in Morris Township some 14 miles northwest of Marianna. After following a tortuous course, and receiving as tributaries Bare and Little Ten Mile Creek, it empties its waters into the Monongahela River near Brownsville. Its waters are collected from 100 square miles of water shed on which are located numerous villages and con-

tigious to which are 964 properties. The stream is subject to rapid rise and is usually turbid from the clay soil through which it flows throughout its entire length. It flows through a country which has had practically all of the timber removed, some 15 to 20 per cent. only being covered with forests.

Water Supply. The Marianna Water Supply is the principal source of water supply, connections having been made in every building and various other taps are supplied for the use of the residents. The water plant consists of a dam, some 8 feet high and 100 feet long, an intake well, force pumps, storage reservoir and a distributing system. The supply is taken from Ten Mile Creek within the borough and well below a natural drainage area from a greater portion of the borough itself. The storage reservoir was constructed in December, 1910, is a circular, concrete, open reservoir with a capacity of two million gallons, and rests to the north of the borough at an elevation of nearly 600 feet above the stream. There are three springs and 26 dug wells in the northern section of the borough to which section all cases of typhoid fever were limited. The wells are all cased down to rock formation and are operated by cast iron pumps.

Sewage Disposal. The Pittsburgh-Buffalo Company installed a sewerage system in 1909; a private sewer is maintained by the Marianna Hotel and the Farmers' National Bank. All sewer lines empty into Ten Mile Creek to the east of the town and well below the dam intake of the water company. There are also 64 privy vaults in the borough.

A preliminary survey and a tabulation from the census of 42 cases made the day of arrival, indicated that the transmission of the infection was by water. Measures were at once taken to sterilize all suspected sources, and, meanwhile to study the epidemic in more detail. The results of that study are presented in the following tabulation and commentaries.

AGE AND SEX.

	Male.	Female.	Total.
0 to 4,	7	6	13
5 to 9,	6	5	11
10 to 14,	4	7	11
15 to 19,	2	7	9
20 to 24,	5	2	7
25 to 29,	3	1	4
30 to 34,	3	3	5
35 to 39,	3	3	5
40 to 44,	3	3	5
45 to 49,	1	2	3
Total,	35	37	72

A consideration of sex offered no solution as the disease equally affected males and females; however, the age periods, when considered alone, strongly suggested milk or ice cream as being a serious factor, 48.6 per cent. were under 15 years of age.

A study of the occupations disclosed the following:

OCCUPATIONS.

Housewife,	12
Laborer,	6
School,	16
Miner,	9
Child,	15
None,	7
Clerk,	1
Motorman,	1
Agent,	1
Servant,	1
Machinist,	1
Foreboss,	1
Newsboy,	1
Total,	72

The especial feature noted is that 44 or 60.9 per cent. were individuals who spent most of the waking hours at home.

Occupation.	No.	Per. cent.
Childhood, (under 6 years,	15	20.8
School,	16	22.2
Servant,	1	1.3
Housewife,	12	16.6
	44	60.9

In contrast but 15 or 20.8 per cent. were employed in the mines. It is customary for men so employed to carry tea for drinking purposes while at work, to have coffee or tea with meals and beer during recreation periods.

From this, one would assume that there was added reason to suspect milk to be the transmission agent and investigations were made into milk as a factor early in our work. We had no reason to change the opinion formed after the first day of work.

MILK.

Campbell,	24
Shape,	16
Horne,	19
Condensed,	1
Davis,	1
Beck,	1
None,	7
Horne and Shape,	1
Zollersville,	1
Sedor,	2
	72

As noted, 59 of the 72 cases obtained milk from 3 sources, between which there was nearly equal distribution. Careful investigations of these sources disclosed the following:

1. E. C. Campbell, West Bethlehem Township, two and one-half miles from Marianna, milks 14 cows, producing 20 gallons and supplies 70 families, all in the borough. There has been no gastro-intestinal disease affecting residents or employees for more than five

years; the conditions are very insanitary. An analysis of his milk (as marketed) showed a total bacterial count of 450,000 to 490,000 per c. c.; no B. Coli were found in 10 c. c.

2. D. N. Shape, West Bethlehem Township, 3 miles from Marianna, milks 8 cows, producing 15 gallons and supplies 75 families, all in the borough. There has been no gastro-intestinal disease affecting residents or employees for over six years; sanitation is only fair. Analysis of milk (as marketed) showed a total count of less than 600,000 per c. c., no B. coli found.

3. D. G. Horne, West Bethlehem Township, three and one-half miles from Marianna, milks 9 cows, producing 16 gallons, and supplies 50 families. There has been no gastro-intestinal disease affecting residents or employees for over fifteen years; sanitation of house is fair, of the stables, very poor. Analysis of milk (as marketed) shows from 6,750,000 to 17,250,000 per c. c.

It should be noted that the relation between families supplied and cases of typhoid fever on routes bears the following relation:

	Families supplied	Cases on route
Campbell,	70	24
Shape,	75	16
Horne,	50	19
	<hr/> 195	<hr/> 59

The average number of persons per family is high in Marianna and while a census of the borough was not taken, it was found to be 7.6 per cent. in the homes where typhoid occurred; that is, the total population of households in which the 72 cases occurred was 550 and in the 195 families, practically 450 persons were using milk from the three principal sources; of these only 59 developed the disease. This disproportion, absence of a history of trading between dealers, and the positive indications that the water was at fault, seemed to exclude milk as the source of transmission.

The 72 cases were distributed as follows:

1 case in house,	44
2 cases in same house,	16
3 cases in same house,	6
4 cases in same house,	5
6 cases in same house,	1
	<hr/> 72

Ice Cream.

None,	56
Arcade,	16
	<hr/> 72

From the tabulation it will be noted that of the 72 persons ill with the disease but 16 used ice cream at any time. The supply which was sold at the Arcade (the only place which handled this food stuff)

was obtained from the Monongahela Ice Cream Manufacturing Company, an investigation of which showed that pasteurized cream was used for manufacturing purposes and that no person known to have suffered with any type of gastro-intestinal disease was employed in the manufacturing or shipping.

The relation of shell fish, vegetables and fruits, and ice were carefully investigated with the following results:

Shellfish.

None,	63
Company store,	7
Boyer's,	2
	<hr/>
	72

Vegetables and Fruits.

Company store,	32
None,	36
Ulery Bros.,	3
Hommeck and Miller,	1
	<hr/>
	72

Ice.

None,	72
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The dates of onsets indicate, on superficial examination, a more or less continuous period of infection, at no time assuming the explosive character found in water borne epidemics. This long continued period of transmission is shown in the table of onsets.

Onsets.

February 9-11,	1	March 13,	2
February 11,	1	March 14,	3
February 20,	3	March 16,	3
February 21,	2	March 17,	1
February 24,	2	March 19,	1
February 25,	3	March 20,	1
February 27,	3	March 24,	2
March 1,	8	March 25,	2
March 2,	2	March 27,	1
March 4,	1	March 29,	1
March 6,	2	March 30,	2
March 7,	3	March 31,	1
March 8,	1	April 1,	1
March 10,	3	April 3,	1
March 11,	2	April 6,	4
March 12,	5	April 7,	1
		April 8,	1

The only record of precipitation and temperature changes obtainable were those from observations made by the Pittsburgh Station of the U. S. Weather Bureau; these conform to the history of conditions observed at Marianna.

Date.	Height of river in feet.	Change since last report.	Precipitation in inches in last 24 hours.	Amount of snow on ground in inches.	Temperature 12 Noon Pittsburgh.	State of weather.
January 1,	F 15.1	-2.7	.05	T	42	Foggy
January 2,	F 13.1	-2.0	.02		57	Foggy
January 3,	S 14.5	+1.4	.09	0.0	22	Cloudy
January 4,	S 16.5	+2.0	.20	2.0	15	Cloudy
January 5,	F 15.5	-1.0	.00	2.0	15	Partly cloudy
January 6,	F 12.4	-3.1	.00	1.5	35	Cloudy
January 7,	F 11.0	-1.4	.00	1.0	37	Cloudy
January 8,	F 10.2	-0.8	.00		44	Cloudy
January 9,	S 9.9	-0.3	.10	0.0	23	Cloudy
January 10,	S 9.9	0.0	.00	0.0	35	Foggy
January 11,	F 9.4	-0.5	.00	0.0	52	Cloudy
January 12,	F 9.0	-0.4	.07	0.0	43	Cloudy
January 13,	R 12.1	+3.1	.75	0.0	47	Raining
January 14,	R 28.8	+16.7	.02	0.0	60	Cloudy
January 15,	F 23.5	-5.3	.10		33	Cloudy
January 16,	R 20.5	-3.0	.00	0.0	18	Cloudy
January 17,	F 17.9	-2.6	.00	0.0	21	Cloudy
January 18,	F 14.0	-3.9	.00	0.0	3	Clear
January 19,	F 11.8	-2.2	.00	0.0	32	Cloudy
January 20,	F 10.5	-1.3	.00	0.0	39	Cloudy
January 21,	F 9.8	-0.7	.07	0.0	43	Raining
January 22,	S 9.6	-0.2	.32	4.0	28	Cloudy
January 23,	R 10.9	+1.3	.00	3.6	28	Foggy
January 24,	R 12.9	+2.0	.00	0.0	37	Foggy
January 25,	F 11.5	-2.0	.00	0.0	48	Foggy
January 26,	F 10.7	-0.8	.50	0.0	48	Foggy
January 27,	R 13.5	+2.8	.00	0.0	53	Cloudy
January 28,	S 18.6	+5.1	.27	0.0	39	Partly cloudy
January 29,	F 19.1	+0.5	.00		45	Cloudy
January 30,	R 26.2	+7.1	.90	0.0	25	Cloudy
January 31,	F 33.3	-7.1	.00	0.0	25	Cloudy

Flood stage of river 28.0 feet.

R—Raise.

S—Stationery.

F—Falling.

T—Trace.

There were two periods of snow precipitation; one making a total of 6.5 inches from January 4 to January 7 inclusive; this was followed by a partial thaw with slight but noticeable stream changes after January 8. This change was noted in the Monongahela River at Pittsburgh, as would be expected, at a later date; the increase was over 3 feet on January 13th and over 16 feet on January 14th. The last increase of diarrrhæal disease in Marianna dated from January 10th.

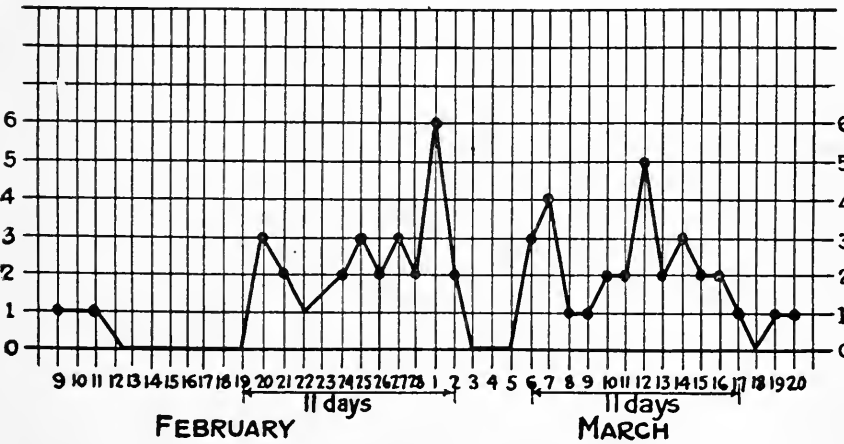
The second snow fall, making a total of 9 inches, occurred from January 22 to January 24 inclusive; an increase in temperature to 53 degrees F. occurred on January 27th. No distinct history of diarrrhœal disease following this thaw could be obtained; however, it is observed that the first wave of typhoid fever onsets began on February 19th and continued to March 2nd, corresponding to an infection period between the dates of January 29th and February 9th.

Date.	Height of River in feet.	Change since last report.	Precipitation in inches last 24 hours.	Amount of Snow on Ground in Inches.	Temperature 12 Noon Pittsburgh.	State of Weather.
February 1,	F 21.0	-12.3	.10	1.0	38	Foggy
February 2,	F 15.0	-6.0	.00	0.0	41	Partly cloudy
February 3,	F 13.0	-2.0	.00	0.0	39	Partly cloudy
February 4,	F 12.2	-0.8	.31	0.0	35	Cloudy
February 5,	R 13.2	+1.0	.00	.....	21	Cloudy
February 6,	F 12.2	-1.0	.35	5.0	31	Snowing
February 7,	F 11.5	-0.7	.05	2.0	27	Cloudy
February 8,	S 11.5	0.0	.02	2.0	35	Foggy.
February 9,	F 11.2	-0.3	.00	1.0	19	Cloudy
February 10,	S 11.2	0.0	.00	0.5	24	Cloudy
February 11,	F 11.1	-0.1	.00	0.5	33	Clear
February 12,	F 10.5	-0.6	.00	.....	40	Clear
February 13,	F 9.9	-0.6	.00	0.0	38	Cloudy
February 14,	F 9.5	-0.4	.00	0.0	50	Foggy
February 15,	F 9.3	-0.2	.10	0.0	45	Cloudy
February 16,	S 9.3	0.0	.00	0.0	47	Partly cloudy
February 17,	F 9.2	-0.1	.00	0.0	60	Cloudy
February 18,	F 9.0	-0.2	.30	0.0	35	Raining
February 19,	R 9.1	+0.1	.10	.....	33	Cloudy
February 20,	R 9.2	+0.1	.35	2.0	24	Snowing
February 21,	R 11.0	+1.8	.06	.....	21	Partly cloudy
February 22,	F 11.9	+0.9	.1	2.0	13	Snowing
February 23,	F 11.0	-0.9	.04	1.0	27	Clear
February 24,	F 10.3	-0.7	.00	0.0	36	Partly cloudy
February 25,	S 10.2	-0.1	.00	0.0	43	Clear
February 26,	F 10.0	-0.2	.00	0.0	49	Cloudy
February 27,	R 10.2	+0.2	.00	0.0	37	Cloudy
February 28,	R 10.8	+0.6	.00	0.0	22	Snowing

During February, a total of 12 inches snow fall occurred between the 6th and 12th inclusive and followed by a thaw on February 14th and 17th.

The second wave of typhoid fever onsets began on March 5th and continued to March 16th; this period corresponding to the thaw period beginning February 14th and continuing to February 26th.

These figures are shown graphically on the accompanying chart.



An additional but remote factor was found in breaks in the sewer main on February 21st, and again on February 24th. These factors occurred at a point on the western portion of the borough where the mains are conducted by trestle work across a ravine; the latter, particularly after storm or thaw, is the bed of a small stream which flows into Ten Mile Creek about 500 feet above the dam breast. A history of previous sewer breaks could not be obtained, and the early cases cannot be traced to the breaks occurring on February 21st and subsequently.

The tabulation of water used is as follows:—

Water.	
Public only,	7
Public and various,	1
Public and drilled well,	23
Public, drilled well and school, ..	1
Public, drilled well and spring, ..	1
Public and school,	1
Public, reservoir and drilled well, ..	1
Spring only,	1
Spring and school,	2
Drilled well only,	22
Drilled well and spring,	1
Reservoir,	3
Reservoir and drilled well,	6
Reservoir and school,	1
Various,	1
	72

35 used public water only or with other water.

37 denied use of public water.

22 used drilled well water only.

59 used drilled well water alone and with other.

If the above tabulation were to be relied upon it would point to the source of infection of water supplies from drilled wells. However, the major number of those who were questioned were foreign born and unable to understand the questions asked. Prior to the arrival of your representatives these people had unquestionably used the public water supply, service taps for which are located in every house, and had only been using drilled well water after a warning which was issued by the Pittsburgh-Buffalo Company. Had it been possible to have an interpreter we probably would have discovered that the major number, even all of these cases, had used the public supply either alone or in connection with some other source.

The analysis of specimens carefully collected in sterile bottles, and shipped under ice, on March 15th, two specimens being collected from each source mentioned, gave the following results:—

	Bacteria per c. c.	B. Coli per c. c.
Spring No. 124,	12,400	8
Spring No. 1,000,	5,600	6
Public tap,	4,500	+
Public tap,	1,375	2
Raw water Ten Mile Creek,	3,800	+
Public tap,	1,900	0
Drilled well No. 310 (common drinking place),	360	0
Drilled well No. 54, (school),	49	0

The analysis of water supplies and the location of those to which cases were attributed by some of the residents of the borough are included in the following table. The specimens for which the analysis is given were collected on the day prior and subsequent to the installation of the hypochlorite of lime treatment plant on the public water supply March 18, 1911.

Source.	Number of cases.	Bacteria per c. c.	B. Coll per c. c.
Spring No. 915,	1	500	4
Spring No. 124,	1	280	18
Spring No. 1000,	2	.....	.....
Spring No. 54, (school),	16	.....	.....
Tap house No. 912, .....	.....	10	0
Tap house No. 804, .....	.....	2520	0
Tap house No. 51, .....	.....	42	0
Tap house No. 428, .....	.....	16	0
Drilled well No. 310,	7	8	0
Drilled well No. 518,	6	.....	.....
Drilled well No. 800,	14	16	0
Drilled well No. 725,	3	.....	.....
Drilled well No. 67,	3	.....	.....
Drilled well No. 65,	3	.....	.....
Drilled well No. 1104,	2	.....	.....
Drilled well No. 121,	1	.....	.....
Drilled well No. 61,	1	.....	.....
Drilled well No. 419,	2	81	0
Drilled well No. 417,	1	9	0
Drilled well No. 126,	1	.....	.....
Drilled well No. 604,	1	.....	.....
Drilled well No. 1410,	1	200	0
Drilled well No. 13,	1	.....	.....
Drilled well No. 724,	1	.....	.....
Drilled well No. 502,	1	.....	.....
Drilled well No. 64,	2	.....	.....
Drilled well No. 517,	1	0	0

It should be noted that but 2 cases obtained their water supply from Spring No. 1,000 and 1 case each from springs No. 124 and No. 915. These and the water company's specimens were the only ones showing a high total count or the presence of B. Coli. The largest number of cases attributed to any one drilled well, except the school well, was 14 cases, who secured water supply from well No. 800. The analysis of this and the physical conditions relative to it show that the water supply is highly potable. It is observed that 16 school children obtained water supply from well No. 54, the analysis of which was negative.

The record of previous cases of typhoid fever on the water shed shows that the disease has been more or less constantly present in West Bethlehem Township since August 1910, and in Amwell Township since June 1910. The cases recorded as occurring on the water shed and in Marianna during 1910 and 1911 are:—

TOWNSHIP CASES.

	1910.							1911.						
	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	January.	February.
Amwell,	0	0	1	0	0	1	1	4	1	0	4	0	0	2
Morris,	0	0	0	0	0	0	0	5	0	0	0	0	0	0
S. Franklin,	0	0	0	0	0	0	1	0	0	0	1	0	0	0
W. Bethlehem, ...	0	0	0	0	0	0	0	5	0	3	3	2	0	1

MARIANNA BOROUGH.

1910, .....	...	...	...	...	...	...	...	...	...	...	...	...	...	...
1911,	0	0	48	22	...	...	...	...	...	...	2	0	0	0

A more specific analysis of cases occurring on the immediate water shed disclosed the fact that the dejecta from persons suffering with typhoid fever in Lone Pine, Amwell township during August, October, November and December, 1910 directly polluted a tributary to Ten Mile Creek. Lone Pine is about 7 miles above Marianna. A tabulation of 13 cases and their relation to pollution of Ten Mile Creek is shown in the following table:—

AMWELL TOWNSHIP CASES.

Age.	Case No.	Address.	Date of onset
38	1	Lone Pine,	*Aug. 1, 1910
39	2	Lone Pine,	*Sept. 5, 1910
23	3	Lone Pine,	*Sept. 27, 1910
38	4	Lone Pine,	*Oct. 1, 1910
13	5	.....	—Oct. 8, 1910
13	6	.....	—Oct. 21, 1910
8	7	Lone Pine,	—Nov. 9, 1910
5	8	.....	*Nov. 9, 1910
2	9	Lone Pine,	*Nov. 10, 1910
11	10	Lone Pine,	*Nov. 10, 1910
12	11	Lone Pine,	*Dec. 1, 1910
7	12	.....	+Dec. 23, 1910
33	13	Lone Pine,	—Jan. .. 1911

* Polluted Ten Mile Creek, (tributary) by overflow over land—washed out trench—and also by using school privy on creek bank.

=Infected at *

° Infected Pittsburgh—may have polluted stream.

+ Infected by sister.

— Not able to trace relation.

A distinct history of flood occurring on or about the 2nd of January and again subsequent to the 10th of January is given by the residents in the village of Lone Pine.

The tributary to Ten Mile Creek (which divides the village into two portions) was so high that it overflowed the land adjacent to the school house, including a portion of the school yard and the pre-

mises occupied by cases 5, 10, 11 and 12, which is located on the banks of the stream a short distance below. Those in care of the sick in the latter family placed the dejecta in a shallow ditch on the banks of the stream and failed to cover with lime. They also give a history of having thrown a great deal of the dejecta on the ground surface. All of this section was inundated during the flood periods mentioned.

It would seem that the analyses of all of the conditions relative to the water supplies in Marianna that the supply from Ten Mile Creek was the main if not the only infecting source. The water in the dam is shallow and is backed up stream to some five or six hundred feet from the dam breast. There is more or less stagnation and even during periods of high water there will be some degree of subsidence at this point. This factor may account for the distribution of cases as indicated by onsets over a long period of time.

Investigation of sewage, garbage and other waste disposals, indicated in the following tabulation, shows the unusual attention which is given to sanitary measures by the local authorities:—

Sewage.	
Sewer,	68
Privy,	4
	<hr/> 72
Garbage.	
Removed,	72
Kitchen Waste.	
Sewer,	72
Wash Water.	
Sewer,	72

A special meeting of the Board of Health was held on March 18th and the information relative to the service and measures necessary to present secondary infections was given to them. The Board of

Health consisted of the following:—

RALPH WILSON, President.
 DR. F. F. COBB,
 J. R. HOSICK,
 J. M. HARRIS,
 C. M. CARTER,
 E. R. SCOTT, Secretary and Health Officer.

The members desired especial information on organization and rules and regulations. During the subsequent days of investigation, a set of rules and regulations was drawn up and adopted as Borough Ordinances. A copy of these is in the Department Files.

By instructions from J. H. Jones, President of the Pittsburgh-Buffalo Company, every assistance was rendered your representatives, especially through the services of Dr. Thomas, Operative Superintendent, J. H. Crawford, Superintendent of the Water Company, Drs. J. J. Cobb and Thos. Manley, and Health Officer E. R. Scott.

A hypochlorite of lime treatment plant was installed on the night of March 17th and was in operation at 4 A. M., March 18th. The piping system and reservoir were drained. The three springs were placarded with Form 642 and where piping from these existed it was removed by the borough authorities.

A privy vault at the school building which was overflowing and could remotely prove a wet weather menace to the source of the borough water supply was drained and disinfected.

Circular Form 2 was handed to each household where the disease existed; in addition, the company gave especial instructions as to sanitation.

OUTBREAK OF SMALLPOX IN WALKER TOWNSHIP, JUNIATA COUNTY.

In accordance with instructions I visited Walker township, Juniata county, on April 25th, in order to investigate the treatment of smallpox contact cases which were said to exist in that township. The history of the outbreak is as follows:

Dr. W. H. Banks, County Medical Inspector, was called to attend Mrs. Annie B., wife of William T. B., on March 3rd. He found her to be suffering with sore throat with rather severe constitutional symptoms, such as headache, backache, high temperature and some slight mottling of the face. She, as well as her children, had active lesions of *tinea circinata*. After prescribing, he instructed the patient to inform him if she were no better, in order that he might make a return visit. At the time of this visit there was nothing to lead him to believe that she might be suffering with a communicable disease. While there he obtained the history that Samuel B., aged three years, had been ill on February 21st., with chickenpox, as diagnosed by the mother, and unattended by a physician.

On April 10th, Dr. Banks was called to see Solomon B., aged seventy years, the father-in-law of Mrs. Annie B., and found him to be suffering with small pox, the date of onset being fixed as April 4th. He also discovered that four other children in the William T. B. family—Bertha, Lucy, Elmer and John, had been ill with chickenpox, as diagnosed by the family, on the dates of March 9th, 12th, 14th, and 15th respectively. Dr. Banks immediately called at the William T. B. home

and was able to establish the diagnosis of smallpox and, finding that twenty days had elapsed since the last case was convalescent, he secured complete disinfection of the persons, clothing, and house but no further action was taken.

On April 18th Mrs. Kate B., aged sixty-two years, the wife of Solomon, B. became ill with the disease and on April 17th, William L., aged forty-four years, who had been a contact with the original B. family, became ill with the disease.

The contacts are as follows:

With the William T. B., family:

Mrs. Schottsberger, Mexico, on March 4th. Had not developed the disease on April 22nd.

James McGruder, Mifflintown, R. D., on March 5th. Free from disease on April 22nd.

Mattie Book, Thompsonstown, R. D., in contact on March 5th. Free from disease April 22nd.

Mrs. S. P. Leiter, Mexico, in contact on March 5th. Free from disease on April 22nd.

Samuel Leiter, Salem, in contact March 6th. Free from disease April 20th.

Zerbe Dysinger, Mifflintown, in contact March 6th. Free from disease April 20th.

Viola Ginerich, Mifflintown, R. D., in contact March 10th. Free from disease April 20th.

John Showers, Mifflintown, in contact April 3rd. Free from disease April 24th.

These cases were not vaccinated. All are of the Mennonite faith and resist vaccination.

William Lauver, Mifflintown, R. D., in contact April 3rd. Had never been vaccinated. Developed smallpox April 17th. Has wife and nine children, all vaccinated on April 20th.

Martin Kauffman, McAllisterville, in contact March 31st. Vaccinated. Free from disease April 22nd.

William Auker, Mexico, in contact April 2nd. Vaccinated. Free from disease April 22nd.

CONTACTS WITH SOLOMON BRUBAKER FAMILY.

Mrs. Oberholtzer, Mifflintown, in contact April 9th. Vaccinated April 11th. Free from disease April 22nd.

CONTACTS WITH THE WILLIAM LAWER FAMILY.

Robert Willough, Mifflintown, R. D., in contact April 22nd. Was not vaccinated. Is a stone mason and at the time contact was mentioned was doing some work on the outside of the premises of William Lauver. Did not go into the house and had no immediate relations with the Lauver family.

CONTACTS IN CHURCH.

The Brubaker children attended the Mennonite Church in Walker township on April 9th, but the names of the individuals, except those noted above as being present on that day, could not be definitely learned. None of these children have attended public school as there was illness in the family from the time the baby—Samuel Brubaker, became ill up to the time school ended in March.

John Brubaker attended public sales for farming implements, which were held in the open at Martin's, on or about April 4th or 5th. According to his own statements he was not in contact with any one, and as these sales were attended by men from all over the neighboring counties, the majority of them being unknown, no definite history of contacts can be obtained.

During the week of February 18-25 a traveling man from Harrisburg, representing the Colt Acetylene Gas Company, was in the premises of William T. B. Up to this time the man's name has not been learned.

The general history is that William T. B., wife and son Samuel, visited the premises of Joseph Wert at Sentress, Norfolk county, Virginia, arriving home about February 10th. While visiting this home a child of Joseph Wert's was said to have measles or milk rash in an active form, recovering from the rash within a period of about two weeks. They also visited the premises of Samuel Landis in the same town and after their return home they received a letter from one of these families stating that they had had "considerable smallpox scare" in Sentress but that the patients were rapidly becoming well.

At the present time there are two premises, that of Solomon B. and William L., under quarantine and no smallpox has developed in the contacts except W. L., while only one is within the incubation period according to the date of his contact, and his history is that of not very close relationship. However, Dr. J. H. Heading, his family physician, of McAllisterville, will see that he is vaccinated. Other than this no action was taken.

REPORT ON THE DIAGNOSIS OF SMALLPOX IN MARCUS HOOK, DELAWARE COUNTY, MAY, 1911.

In accordance with your instructions, I proceeded to Marcus Hook, Delaware County, on May 14th, 1911, in order to establish the diagnosis in a case suspected to be smallpox and to confer with the local Board of Health relative to the source and preventive measures. A diagnosis of smallpox was established in the case of E. B., a negro, aged 31 years, his onset being May 7th.

I conferred with the attending physician, Dr. Geo. F. Crothers, and Dr. Leon Gottschalk, President of the local Board of Health. I advised them that the source of the infection was from the Pennsylvania Quarantine Station and gave them a list of the contacts which I had secured, advising them of the necessary action. The patient was under absolute quarantine and all those who had been known to be in immediate contact with him had been vaccinated. Dr. Crothers was deputed as Medical Inspector for the local Board of Health and took charge of all contacts in the borough. He was deputed as Deputy County Medical Inspector by Dr. Hiram M. Hiller of Chester and took charge of all cases occurring in the township outside of the borough.

REPORT ON DIAGNOSIS IN A CASE OF SUSPECTED ACUTE ANTERIOR POLIOMYELITIS.

In accordance with your instructions I visited Siddonsburg, Monaghan Township, York County, on April 7th, in order to establish the diagnosis in a patient under the care of Dr. B. E. Gamble of Bowmansdale. The latter's report indicated partial loss of function of the right lower extremity following a febrile course and the presence of oedema and discoloration of the eye-lids.

The patient, Gilbert M. D., aged eleven months, is the son of Floyd K. D., of Siddonsburg. The history given is that of a normal birth, being the second child to the mother he was breast fed for nine days at the end of which time because of pelvic complication on the part of the mother and of gastric irritability on the part of the child, he was placed on condensed milk and later on Mellin's Food for a period of three or four weeks. About this time Eskay's Food was used, alternating with various other proprietary foods until on or about October 1, 1910, when Nestles' Food was adopted and has been used exclusively up to the present time.

There has been markedly lessened gastro-intestinal irritability since the adoption of this food but regurgitation has occurred at almost every feeding unless scale pepsin was used in the preparation. Diarrhoea alternated with constipation, the stools showing almost constantly a green color and some mucus ever since birth. The only evidence of presence of blood was in the form of a clot during a diarrhoeal stage some two weeks past. On or about three weeks ago the mother noticed marked swelling of the eye-lid on the left side with discoloration appearing at the end of forty-eight hours. At this time the child was unusually irritable and had some fever. For some weeks there has been marked sweating of the head at night; a slight

but persistent cough has been present for about the same time; marked drooling. Because of difficulty in swallowing the throat was examined and was found to be somewhat inflamed but became rapidly better after the administration of biniodide of mercury. This type of sore throat had been observed several times before. At the end of a week's time the swelling and discoloration of the eye disappeared, re-appearing in both eyes on March 31st. Shortly afterward it was noticed that the right ankle was discolored and that there was marked disinclination to stand on the right foot, this being followed rapidly by an apparent complete loss of power. The irritability increased and there was evidence of pain to all coarse movements; made either voluntarily or passively. During this period the temperature range was as high as 101°.

An examination gave the following results: A child of normal size for the age given; no marked signs of emaciation, cheeks and lips being somewhat full, not yet edematous; marked pallor, the skin being somewhat grayish in tone; no signs of thickening of frontal protuberances, though the cranium has somewhat of box shape.

Mucous membranes: Pale. Two teeth—lower central incisors—erupted within the past five or six days, surrounded by fairly defined swelling and marked bluish discoloration. Swelling and discoloration also noted in the region of the upper central incisors which are near the point of eruption. Gums slightly inflamed.

Eyes: Moderate degree of exophthalmos, oedema of the eye-lids with marked but fading ecchymosis of both eye-lids and of the right infra-orbital region; moderate degree of exophoria; impaired action of the internal recti muscles probably due to the exophthalmos. Sluggishness of pupillary reactions.

Temperature: 98—45.

Glandular system. Thymus gland not enlarged. Spleen not palpable, non-tender, apparently not enlarged. Liver well down to the costal margin, not tender, apparently not enlarged. Lymphatic glands slightly enlarged, freely movable not indurated, palpable in anterior and post-cervical region, supra-clavicular, axillary, inguinal and right popliteal region.

Extremities: All the large joints show a moderate degree of tenderness. There is some swelling with excessive tenderness in the right ankle and both knees. Tenderness on deep pressure of the right hip joint with pain on passive movements. Marked ecchymosis on both sides of the right ankle. No evidences of true paralysis. No change in reflexes; some flattening of right gluteal region but no other signs of wasting. Some slight enlargement of the ends of the long bones is present and a rachitic rosary is marked; all enlargements are tender but are fusiform or cylindrical in type. There is evident pain on pressure over all large joints and the entire sternum.

Specimens of blood for differential staining and bacteria and also urine were obtained. It was not possible to examine blood for percentage of haemoglobin or for counting erythrocytes and leucocytes. The results of the blood and urine analysis are attached to this report.

The analysis of the prepared food used during the past six months in the proportion of two tablespoons to a pint of water and contracted with a normal food, i. e. woman's milk, is as follows:

	Nestle's Food	Woman's Milk.
Water,	92.76	88.51
Salts,	0.13	0.34
Proteids,	0.81	2.35
Fat,	0.36	2.41
Milk sugar,	0.84	6.39
Starch,	1.99	....
Cane sugar,	2.57	....
Maltose, dextrine, etc.,	0.44	....

It is estimated that 2 per cent. of the starches in this prepared food are insoluble. In addition it will be observed that the proteids are approximately one-sixth and the fats approximately one-fourth the normal percentages for these food elements. It is evident that a child suffering for a period of five months with gastro-intestinal disturbances and then placed on a diet for six months containing insufficient food material such as the formula used is the greatest etiological factor for the present condition. Because of the general history, the diet, the changes in the gums, the joint pains and enlargements, the ecchymosis, the marked tenderness on pressure over the sternum and the haemeturia, the diagnosis is that of incipient infantile scorbutus. This condition is complicated by evidences of rachitis which is indicated by the same etiological factors, the peculiar type of the enlargements of the epiphyseal ends of the long bones, the sweating of the head and the slight but persistent bronchial irritation. The anemia is probably purely secondary though rather severe in type. The presence of myelocytes in so small percentage does not justify any conclusions in the absence of other phenomena that the case is one of pseudo leukaemic anemia of infancy.

ANALYSIS OF URINE.

M

Color—Reddish amber.

Turbidity—Cloudy.

Sediment—Red amorphous.

Reaction—Slightly acid. 10 C. C. required 2.5 C. C. N-10 NaOH for neutralization.

Spec. Grav.—1011.

Albumen—Positive 0.04 per cent.

Sugar—Negative.

Indican—Negative.

Urea—0.9 per cent. or 9 grams per liter i. e. 4.26 grams to the pint.

Microscopic.

Cylindroids—None.
 Casts—None.
 Pus—None.
 Blood—A very large amount.
 Crystals—None.
 Epithelium—None.
 Mucus—None.
 Fat—None.
 Bacteria—Some non-motile bacilli.
 Debris—Very little.
 A large amount of fibrin.

Examination of Blood.

Differential leucocyte count:

Polymorphonuclear neutrophilic leucocytes,	50.1	% Normal	60—70%
Transitional cells,	3.2	"	0—5
Eosinophilic leucocytes,	1.3	"	2—4
Large mononuclear lymphocytes,	4.0	"	4—8
Small lymphocytes,	40.3	"	20—25
Basophiles (mast cells),	0	"	0.1—0.2
Myelocytes,	1.1	"	0

Color—Somewhat pale.
 Polychromatophilia—Shown in a few cells.
 Poikilocytes—A few.
 Normablasts—Two observed while counting 1000 leucocytes.
 Megaloblasts—None.
 Microblasts—None.
 Macrocytes—Many.
 Microcytes—Many.

Parasites—None.
 Bacteria—None.
 Hermin crystals—None.

REPORT ON EPIDEMIC OF TYPHOID FEVER AT McSHERRYSTOWN AND VICINITY, ADAMS COUNTY, JULY 1911.

In accordance with your instructions, I proceeded to McSherrystown, Adams County, on July 11th in order to study the reasons for the prevalence of typhoid fever in that borough and vicinity.

McSherrystown is located in a productive agricultural region, three miles northwest from Hanover, York County, with which there is communication by electric cars and a well built roadway. It is for the most part a residential community. Employment for some 15 per cent. to 18 per cent. of the population is found in cigar factories and a smaller proportion in the industries in Hanover.

The investigations included also Conewago Township which surrounds the borough, Oxford Township, Strabane Township and New Oxford Borough. The population of these, according to the 1910 census, is as follows:—

McSherrystown Borough,	1,724
Conewago Township,	1,542
Oxford Township,	996
Strabane Township,	1,392
New Oxford Borough,	838

A report on New Oxford Borough by the Engineering Division includes a study of typhoid fever and for that reason reference will be made only to those cases related to the McSherrystown outbreak.

There is no public sewerage system in McSherrystown. All body wastes are deposited in outside cesspools or privies, while house drainage flows into gutters or cesspools.

The water supply to some 60 per cent. or 65 per cent. of the population and to a majority of residents in Conewago Township is furnished by the Hanover and McSherrystown Water Company. Special reports on this Water Company have already been made. 35 per cent. or 40 per cent. obtain their supplies from storm water cisterns and dug wells.

The geologic formation in this region is limestone and in certain instances there is ample reason to believe that the wells may be infected from cesspools.

The morbidity from typhoid fever in the two boroughs and three townships studied shows that the disease has been more or less constantly present in this region; the following cases have been reported during the period mentioned.

	Jan.	Feb.	March.	Apr.	May.
McSherrystown Borough,	7	3	0	0	0
Conewago Township,	0	0	0	0	0
Oxford Township,	4	2	0	3	1
Strabane Township,	0	0	0	0	0
New Oxford Borough,	0	1	5	3	3

For the purpose of tracing the infections giving rise to the prevalence of typhoid fever in the boroughs and townships named, it is necessary to refer to the illness of Mrs. S. H., the wife of a farmer residing in Oxford Township.

Her illness dates from April 20th, 1911 and was reported to Health Officer A. W. Kinneman on April 26th. On that same date he established quarantine, giving especial instructions because milk and cream were a portion of the products. The premises were not visited by the County Medical Inspector.

The source of her infection could not be determined although she had visited New Oxford borough, in which (as shown above) the disease had been more or less endemic.

Sanitation on this farm is not observed; there is the usual carelessness found in agricultural communities. No precautions were observed by the patient or those nursing her. She assisted in the milking and other duties during the first ten days of illness and resumed the same duties as soon as released from confinement to bed. Terminal disinfection was not practiced because a request was not received from the attending physician.

Bertha H., a daughter, aged 16 years, developed the disease, dating from May 23rd. She had not been absent from home and undoubtedly was a secondary case.

The water supply for domestic use is from a dug well near the kitchen door, which can readily be infected by kitchen waste and wash water; the supply at the barn for cattle and washing milk containers was within the cow yard. The analysis made of specimens collected on July 13, 1911 follows:—

	Bac. per c. c.	B. coli per c. c.
No. 1 House Pump,	100	8
No. 2 Barn Pump,	160	6

The cream from this farm was taken daily to the New Oxford branch of the Hanover Creamery Company, where, by arrangement between G. F. Rickrode, Manager of Branch No. 7, and Roy Taughenbaugh, owner of the New Oxford Ice Cream Manufacturing Company, such portion as was needed was delivered to the latter. The other portion was pasteurized and shipped with the products from forty-five other dairy farms to the main station of the Hanover Creamery Company at Hanover, Pa. Some of the milk was retailed in New Oxford. Among the cases reported in New Oxford during April and May four patients used the S. H. milk.

Mr. Taughenbaugh procured cream from but two other sources—the dairy farms of F. H. and G. C. These farms were visited and the residents examined as to previous and present medical history with negative results. I was accompanied by the family physicians.

The New Oxford Ice Cream Manufacturing Company ships ice cream to the following:—

H. C. Freed and J. C. Felty, New Oxford.

J. A. Menchey, Gettysburg Borough.

John Rider, Hanover Borough.

J. J. Staub, Boneauville, Mt. Pleasant Township.

Staub & Bair, McSherrystown Borough.

M. S. Culp, McSherrystown (Eagle Hotel).

James Meyers, Brushtown, Conewago Township.

Chas. Mummert, Abbottstown.

Cleat Storm, Mt. Misery.

John Martin, Irishtown, Oxford Township.

John Decker, Hunterstown, Strabane Township.

He also made other sales but was unable to give a record.

The output of the plant averaged 80 gallons per day prior to June 20th; since that day an average of 20 gallon is produced.

Roy Taughenbaugh and his daughter Elizabeth developed typhoid fever with onsets for both on or about June 11th. The former worked in the plant during the prodromata and was first confined to bed on

June 21st. His shipments to Bair and Staub, proprietors of the Royal Cafe in McSherrystown, were as follows:

May 21,275 gallons.

June 19,219 gallons.

A shipment of 20 gallons was promptly returned on June 26th, 1911, since which time he has purchased his cream from N. Peterman, Baltimore Street, Hanover. A shipment of May 27 of 35 gallons was used at a festival held in St. Mary's Church.

A tabulation of the census made of the 50 cases of typhoid fever occurring in McSherrystown Borough and in Conewago Township is presented to show the relation of ice cream to the epidemic:

Dates of Onsets.

Date	McSherrys- town.	Conewago Township.
June 3, .....	..	1
June 4, .....	..	1
June 6,	1	..
June 7, .....	..	1
June 8,	2	..
June 10,	4	..
June 11,	1	..
June 12,	4	2
June 13,	1	..
June 14,	1	..
June 20,	1	..
June 23,	1	..
June 24,	1	..
June 25,	3	7
June 29,	1	..
July 1,	1	1
July 10,	4	..
July 12,	1	..
July 16, .....	..	1
July 17, .....	..	1
July 20, .....	..	1
July 22, .....	..	1
July 23,	1	..
July 25, .....	..	1
August 2,	1	..
August 3,	1	..
August 13,	1	..
August 14,	1	..
	32	18

50 Cases.

Age and Sex.

Age.	Male.	Female.
0—4	2	4
5—9	10	5
10—14	7	5
15—19	3	1
20—24	2	..
25—29 .....	..	5
30—34	1	..
35—39,	1	3
60—65	1	..
	27	23

Water.

Public supply,	18
Public supply and various,	1
Public supply and Conrad's well,	1
Public supply and Rahn well,	1
Public supply and Smith well,	1
Public supply and Rice well,	2
Public supply, Collins and Eline well,	4
Public supply and Eltz well,	1
Public supply and Cremer well,	1
Public supply and Weider well,	1
Public supply and Horner well,	1
Public supply and Steiner well,	1
Public supply and Topper well,	1
Public supply and Poist well,	10
Public supply and Smith well,	1
Public supply and New Oxford well,	2
Staub well,	2
Krepps well and various,	1
	<hr/>
	50

Bacteriological analysis in the State Department Laboratory of specimens taken from various points of the public supply gave negative results.

The water from all wells examined was negative except the following:

	Bact. per c. c.	B. coli per c. c.
Rahn well,	600	3
Poist well,	10800	0
Eline well,	210	6
Rice well,	60	4

Milk.

Rahn,	5
Herr,	8
Geiselman,	1
Frey,	2
Rahn and Herr,	5
Rahn and Geiselman,	5
Rahn and Frey,	3
Rahn, Herr and Frey,	4
Rahn, Frey and Geiselman,	4
Herr, Geiselman and Frey,	2
Geiselman and Frey,	1
Keaghey and Noel,	10
	<hr/>
	50

Investigation of conditions and the medical history of employees of the four dairies, Rahn, Herr, Geiselman and Frey was entirely negative. The Poist family, 10 of whom developed the disease, obtained a portion of their supply from Jos. Keaghey and at times from neighbor, Mrs. Agnes Noel.

Ice Cream.

J. C. Felty (New Oxford Restaurant),	3
Royal Cafe, (McSherrystown)	24
Royal Cafe and Littles,	7
Royal Cafe and Small,	1
Royal Cafe, Small and Little,	1
Conewago Picnic,	4
St. Mary's Church Festival,	4
Peterman,	1
Small and Little,	1
None,	3
	<hr/>
	50

The ice cream sold by J. C. Felty, the Royal Cafe, and that used at the Conewago Picnic and St. Mary's Church, was purchased from the New Oxford Ice Cream Manufacturing Company. Hence, there is a plain history of 90 per cent. of those studied having eaten this ice cream.

Mr. Little and Mr. Small made their own supplies, obtained the cream from local dealers. Investigation of these three sources of ice cream gave negative results. The 10 per cent. unaccounted for were found to be secondary infections.

Borough List of Contact Infection.

- No. 1. Onset June 6th. Visited in New Oxford prior to June 18th and ate ice cream at the Felty restaurant.
 No. 27. Onset July 23rd, was a contact with No. 12, onset June 12th.
 No. 28. Onset August 2nd, had eaten ice cream at the Conewago Picnic and had a prolonged prodromal period before actual illness.
 No. 29. Onset August 3rd, was a contact with No. 4, onset June 10th.
 No. 30 and No. 31. Onsets August 12th, visited New Oxford during July and ate ice cream manufactured at that place.

Conewago Township List.

- No. 14. Onset July 16th, was a contact with 9 other cases in his home.
 No. 15, onset July 17th.; No. 16, onset July 20th.; No. 17, onset July 22nd., were contacts with Nos. 4 and 5, onset June 12th.
 No. 18 ate ice cream from New Oxford during the first week of July.

Primary cases,	40
Secondary cases,	10
	<hr/> 50

INVESTIGATIONS IN OTHER TOWNSHIPS.

The investigations of cases studied in Oxford Township (including Mrs. S. H., the original case), showed that all were traceable to Mrs. S. H., one as a direct contact and five through the medium of milk or ice cream.

In Strabane Township 11 cases were found, 6 of whom had eaten ice cream (manufactured in New Oxford) during the first week of June at a P. O. S. of A. festival. Five others had purchased ice cream from John Decker at Hunterstown who sold the Taughenbaugh product.

Mortality.

McSherrystown Borough,	3
Conewago Township,	1
Strabane Township,	2
New Oxford Borough,	1
Total,	<hr/> 7
Morbidity,	68
Mortality,	7 or 10 %

ACTION AND RECOMMENDATIONS.

A visit to the New Oxford Ice Cream Manufacturing Company was made on July 13th, 1911. Mr. Taughenbaugh was instructed to discontinue the sale of ice cream until he and his daughter had entirely recovered; at the time he was convalescent.

On the same date, Mr. G. F. Rickrode, Manager of the New Oxford Branch of the Hanover Creamery Company, was instructed not to accept milk or cream from the dairy farm of S. H. in Oxford Township. A list of cases on dairy farms was given to him and the Rules and Regulations of the Department were detailed; he was advised as to the reasons for such action and the associated responsibilities. All containers are cleaned at the dairy farm but all milk and cream are pasteurized before sales by the Hanover Creamery Company. The same instructions and information were given to the Manager of the main station at Hanover.

The Rules and Regulations of the Department were reviewed in a detail and explanatory way to S. H. and Mrs. S. H. They were notified that further sales would not be permitted until insanitary conditions and practices on their farm were corrected. They were disinclined to accept the instructions, and it was necessary to review the penalty clause of the Act of Assembly, dated May 14, 1909.

In McSherrystown Borough I met, by invitation, with the local Board of Health, and gave to them the requested epidemiologic diagnosis and prognosis. The measures to prevent secondary infections were detailed. Action was taken requiring (1) the disinfection and sanitary cleaning of the premises and all table and other utensils at the Royal Cafe, (2) that St. Mary's Church authorities should sterilize the table utensils, (3) the abatement of house wastes into public streets, (4) disinfection of gutters and drains with fresh unslacked lime, (5) closing to the public use all wells and cisterns, shown by physical surroundings or bacteriological diagnosis not to be potable.

INVESTIGATION OF TYPHOID FEVER AT FLORIN, LANCASTER COUNTY, AUGUST, 1911.

In accordance with your instructions I proceeded to Florin, Lancaster County, on August 3d in order to investigate the prevalence of typhoid fever in that community.

Florin is a township town with a population of three to four hundred, approximately one-half being in East Donegal Township, and the other half in Mt. Joy Township, Lancaster County. The local industries are a tobacco warehouse, a wholesale grain and feed mill and a milk station. For the most part the population is entirely a resident community.

The water supplies for this community are obtained from dug and drilled wells except for one or two families, who obtain their water from spring supply. Sewage is disposed of for the most part, in privy vaults and in a few instances in cesspools. There is no public water supply or other method of sewage disposal.

There have been no cases of typhoid fever previously reported from this community and only rarely a case in remote portions of the township. One case was reported during March, 1911, one during April, 1911, in East Hempfield Township which adjoins, and one case occurred in Mt. Joy Borough during May of the same year. However, these cases bore no relation to the outbreak investigated in Florin during July and August.

Source of Infection. The source of infection in this restricted outbreak was so definitely located that it seems advisable to present the data in detail.

One E. H. was taken ill in Philadelphia, the onset being probably June 21st. On June 28th he was seen by Dr. W. B. G., of Philadelphia, who informed him that he was suffering with "summer grippie." Dr. G. made one other visit and then failing to revisit his patient, and the latter feeling no better, Dr. G. Y. MacM. was called on July 3d, who at once established the diagnosis of typhoid fever. The patient desiring to return to his brother's home in Florin, Pa., proceeded at once to the home of J. H. on the evening of July 3d. On the same evening Dr. F. L. R., of Mt. Joy, made his first visit and attended the case up to and including July 23d. The case was never reported to the Health Officer, the premises were not placarded and the dejecta were deposited in a cesspool on the premises.

Between the dates of July 17th and 26th, 24 persons living in the immediate neighborhood of the same premises developed typhoid fever. The analysis of these cases is as follows:

Onset.	
June 21,	1
July 15 to 22,	18
July 22 to 26,	6
	<hr/> 25
Age	
10 to 20 inclusive,	5
21 to 30 inclusive,	13
31 to 40 inclusive,	2
41 to 50 inclusive,	4
Over 60,	1
	<hr/> 25

Sex.	
Males,	15
Females,	10
	<hr/> 25

Families.
17—Total population—77.

Water.	
E. S. Moore well only,	21
E. S. Moore well and Eby well,	1
E. S. Moore well and Mt. Joy water supply,	1
E. S. Moore and melted ice,	1
Various supplies,	1
	<hr/> 25

The analysis of the various sources of water supply which bear some relation to the outbreak follows:

		Bacteria per c. c.	B. Coli per c. c.
No. 1.	E. S. Moore well, specimen—		
	No. 1,	5,400	360
	No. 2,	7,200	600
	No. 3,	9,000	500
No. 2.	E. S. Moore mill well,	3,500	200
No. 3.	J. W. Scott shipping station well,	500	80
No. 4.	Nissley school well,	60	0
No. 5.	Schlegelmilch well,	240	0
No. 6.	Kline well,	500	0
No. 7.	Eby well,	20	0
No. 8.	Hostetter well,	10	0
No. 9.	Raymond well,	200	0
No. 10.	Florin Inn spring tap,	6,000	0
No. 11.	Florin Inn cellar well,	2,400	0
No. 12.	Barson well,	140	0

It is observed that the feature common to all the cases is the water from the E. S. Moore well. This well is practically the sole source of supply to the immediate neighborhood and has considerable reputation as being the "town pump"; it has been in constant use for many years. The last time it was opened and cleaned was about 30 years ago. It is said to be 60 feet deep, walled with lime stone, the lower portion being cut into solid rock. It is protected with an ordinary wooden cover somewhat elevated above the surrounding ground and the water is secured by an old wooden pump. It is located slightly below the grade and 180 feet (actual measurement) distant from the cess pool on the premises of J. H. in which was housed the first case of typhoid fever. An abandoned privy vault on the same premises is about 90 feet distant and is said to have been dug to a depth of three feet, is unwalled, and is so located that surface drainage is directed away from the E. S. Moore well.

The J. H. cesspool, up to three years ago, was a well from which water supply was, in part, obtained; however, the flow was never active. It is about 30 to 35 feet deep, the lower 16 feet being in solid lime stone; three years ago it was connected by sewer with the inside bathroom during extensive alterations to the property, was

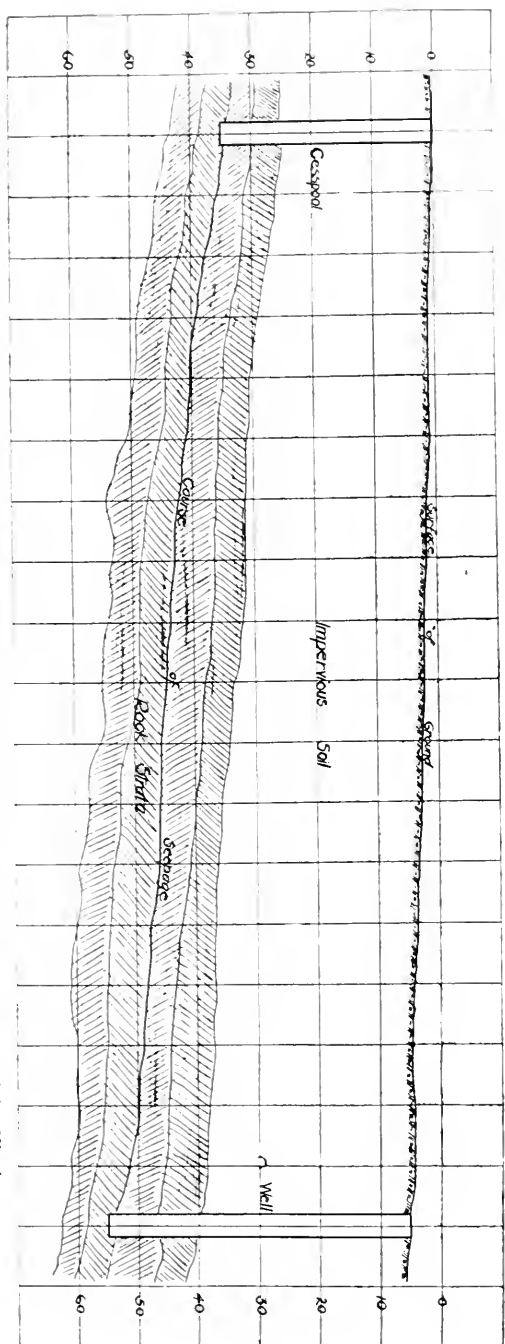
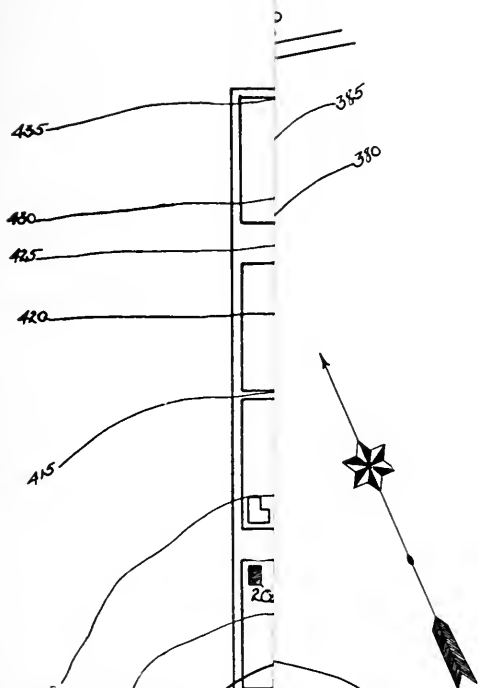


Diagram to Show the Stratigraphical Relation of the Well (No. 1) to a 'certain' 'cresspool' in Florin.





Map to Show the Spread of Typhoid Fever in Florin.

capped with concrete, and has received the sewage from the residents of the house since that date. The accompanying diagram drawn to scale shows the geologic strata and the relation of the well to the cess-pool.

There are two other sources of water supply in addition to the E. S. Moore well which are of interest because of their relation. The well (No. 2) on the E. S. Moore mill property and the one (No. 3) on the J. W. S. milk shipping station property are located on the same drainage area as the E. S. Moore well. The accompanying diagram, showing the elevation contour lines would indicate that these three wells are located in a basin which would permit underground drainage into these three sources of water supply.

This opinion is emphasized by the analysis of the water supplies, the specimens being carefully selected with references to the cases and to elevation points in that section. Of 12 sources of supply the only three giving high bacterial and *B. coli* counts are the three wells referred to.

Milk.

B. F. Kauffman and Son,	7
Eliza Bossler,	1
Henry S. Kraybill,	2
Amos N. Stauffer,	4
Combinations of above,	10
Various,	1
	<hr/> 25

B. F. Kauffman & Son, of Mt. Joy, secure their milk supplies from the dairies of Samuel Meyers and Aaron Nissley, of Rapho Township, and Monroe Shaffer, of Mt. Joy Township, Lancaster County. An investigation of these dairies showed that no gastro-intestinal disease has occurred among the residents or employees during a period of five years.

Amos N. Stauffer, of East Donegal Township, secures his milk supply in part from his own cattle, the remainder coming from the dairies of Elias Lindenmuth, Henry Hostetter, Israel Mumma, John Coll, Noah Mumma, Amos Eby, Benj. Brubaker, and Harry Leedam, all located in East Donegal Township. An investigation of these dairies showed that neither the residents nor the employees had suffered with gastro-intestinal disease during a period of five years and the sanitary conditions were such that it was not likely that they were the source of transmission.

Except for a small amount of trading with the above dairies, H. S. Kraybill and Eliza Bossler secure their milk from their own cattle.

One case of typhoid fever, M. B., daughter of I. B., aged 19 years, developed on July 22nd and was immediately taken to the residence of Eliza Bossler, in whose home she has since been confined to bed. She is under the direct care of a graduate nurse who informs me that all utensils and clothing are kept separate from the

remainder of the household, the stools are properly disinfected and are buried in the yard. No other member of the household who has anything to do with the handling of the milk has been in contact with the patient.

The milking and care of the milk utensils are in the hands of Mrs. Eliza Bossler and one attendant.

Ice Cream.

J. G. Beatty, Florin,	10
Homemade,	4
None,	6
Samuel Fetter, Elizabethtown,	1
Garver's Drug Store, Chandler's Drug Store, (Mt Joy),	3
Shellenberger's Grocery Store,	1
	<hr/> 25

The history of the use of ice cream is sufficiently varied to exclude it as a possible source of infection. J. G. Beatty secures his cream for manufacturing purposes from various sources of milk supply to the town and at times purchases ice cream from points in Lancaster and Mt. Joy. He had not purchased supplies sufficiently recently to account for the present outbreak.

Ice

None,	15
C. S. Frank,	9
Unknown,	1
	<hr/> 25

C. S. Frank obtains the major portion of his ice from the Consumer's Ice Company, manufacturers of artificial ice, Lancaster. A small supply is secured from ponds which line the hills adjacent to Mt. Joy, but this has been minimal in quantity and irregular in use.

Action and Recommendations. The E. S. Moore well was, with the consent of the owner, immediately placarded with Form 642, reading as follows:

DANGEROUS.

DO NOT DRINK THIS WATER.

Samuel G. Dixon, Commissioner of Health.
Commonwealth of Pennsylvania.

The pump was temporarily dismantled. Following the recovery of the owner, who was also ill with the disease but not living on the premises, it was filled and closed, in order to prevent future use. A similar action was taken with reference to the drilled wells on the mill and shipping station properties. In each household where the disease existed circular Form No. 2 on typhoid fever was left for guidance, and the measures necessary to prevent secondary cases

were emphasized. The usual regulations of the State Department of Health were established on the premises of Eliza Bossler.

Of the 25 cases there were two deaths or a mortality of 8 per cent.

REPORT OF POLIOMYELITIS AND CEREBRO-SPINAL MEMINGITIS, CONEWAGO TOWNSHIP, YORK COUNTY.

August 22, 1911.

By your instructions I visited Conewago Township, York County, on August 22, 1911, in order to establish diagnosis in certain cases in consultation with Dr. Homer S. Hetrick, of Lewisberry, York County.

The first case, Marie Baker, is a ward in the family of C. L. Sipe, whose post office address is Manchester, R. F. D. Age—two years and five months. She was taken sick on August 11th with nausea and vomiting. On August 12th some increase in temperature was noticed and on the 16th or 17th it was noted that there was decided loss of power in all four extremities, the left arm and left leg being less involved. The child was unusually irritable, with marked nervous twitchings, insomnia, and a moderate amount of diarrhoea preceding the onset. Until paralysis was observed there were no indications of pain or tenderness. On the 16th it was observed that the child cried when moved. Irritability has been marked up to the present time. No history of sore throat or of any evidences of skin eruption could be obtained. The child had not been absent from home for some months except on the day before the onset, which was spent in York. The examination on August twenty-second showed the following:

The pupillary reflex was somewhat sluggish in accommodation to light and distance; otherwise the eyes were uninvolved. The tongue was red coated and protruded in mid line. No tremors. The abdomen was slightly distended and slightly tympanic. No tenderness. Temperature normal. Pulse 136. (Probably neurotic).

The right upper extremity showed complete motor paralysis. Marked retardation of sensation. Reflexes not examined.

The left upper extremity showed motor paralysis of deltoid muscle, the other muscles being uninvolved. Sensation normal. Reflexes not examined.

The right lower extremity showed complete motor paralysis, retardation of sensation. Superficial reflexes slightly exaggerated. Positive Babinski. Deep reflexes absent.

Left lower extremity showed complete motor paralysis except for rotation of the thigh on trunk, and flexion and extension of the toes. Superficial reflexes exaggerated. Bakinski negative. Sensation apparently not retarded.

A diagnosis of acute poliomyelitis was made and specimens of blood were obtained in Widal tubes and on glass slides. The report of the Laboratory Division shows the presence in stained smears of the micro-organism described in the special laboratory bulletin issued in March, 1911.

The second patient, John Beck, son of Penrose Beck, whose post office address is Manchester, R. F. D., lives about three hundred feet distant on the same public road and on a much higher elevation. Age—two years and three months. The prodromata consisted of a moderate degree of malaise, nervous twitchings, some increase of temperature, nausea and vomiting, constipation. The febrile course lasted for a period of eight or ten days, was associated with a moderate degree of delirium. On the eighth or tenth day after onset it was noticed that there was loss of power in both lower extremities. There was also some loss of bladder control. The child has entirely recovered from the acute symptoms, is able to be active around the house and yard. Examination showed complete flaccid motor paralysis. Deep reflexes were absent. Negative Babinski sign. No apparent change in sensation.

A diagnosis of acute poliomyelitis was made but no specimens of blood were taken as it was the 15th day since onset of the disease.

It is interesting to note that in a home some five hundred feet further up the mountain a child, aged five years, gives a history of prodromata similar to the patient John Beck, which no physician saw until some time after the recovery from the acute symptoms, but there is a distinct history that the child dragged her toes when she walked, the right side being more involved than the left. These are the only three cases of any acute illness which have occurred in this little settlement for several months. The people are of the poor mountain class and the surroundings are very insanitary.

Three miles from the last patient, on a farm about a mile from Strinetown, Conewago township, a fourth case was seen, which Dr. Hetrick had made a possible diagnosis of poliomyelitis. This patient, Robert Wire, aged three years, son of Frank Wire, whose post office address is York, R. D. No. 10, was taken ill on August 19th. There was some history of malaise on August 17th but the child was apparently well on Friday, the 18th. Became violently ill that evening. On the 19th, Dr. May, of Manchester, was called, who made a tentative diagnosis of gastro-intestinal disturbance and was not recalled. During this period the child was suffering with nausea and vomiting, with marked stupor, pain when handled and a moderate

degree of diarrhoea. On August 20th, Dr. Hetrick was called to see the case and failing to make a diagnosis asked permission to bring a consultant on the day following. When seen, the patient was semistuporous but responded after some stimulation and gave intelligent replies. The physical examination showed no evidence of ocular disturbance. Temperature 104, pulse 126. There was marked deviation of the tongue to the right. No tremors. The tongue was only moderately coated. There was marked spinal rigidity with considerable distress. Tache cerebrale was positive. Kernig sign on both sides was negative. There was marked retardation to pain and pressure sense. Deep reflexes were apparently abolished but it was difficult to determine this accurately because of distress incident to examination. There was diminished power in all four extremities but no actual motor paralysis. The extremities were flaccid, no signs of spasticity being observed. The abdomen was distended and tympanic. A diagnosis of cerebro-spinal fever was made and Dr. Hetrick instructed to so report it.

REPORT ON AN EPIDEMIC OF BACILLARY DYSENTERY AND TYPHOID FEVER AT BETHLEHEM, LEHIGH AND NORTHAMPTON COUNTIES, 1911.

In accordance with your instructions I proceeded to Bethlehem, Lehigh and Northampton Counties, on August 24th in order to investigate the reasons for an outbreak of Bacillary dysentery.

The Borough of Bethlehem is located on the north bank of the Lehigh River opposite South Bethlehem and about five miles southeast from Allentown. It includes the former borough of West Bethlehem, which was absorbed in 1904. This portion of the borough is located in Lehigh County and is separated from old Bethlehem proper by Monocacy Creek. Each portion of the borough rests upon a hillside with drainage principally into Monocacy Creek. The large portion of old Bethlehem extends over an elevated plateau. The population of old Bethlehem in 1890 was 9,521; in 1900, 10,758 and (after absorption of the Borough of West Bethlehem in 1904) was 12,837.

The market supplies at the time of the epidemic were mostly local, though certain shops sold produce imported from various truck forms. The meats were mostly from the west, though relatively few of those affected had used meats.

The water supply in old Bethlehem is a spring located in the valley of Monocacy Creek; for West Bethlehem is from a private water

company—the Bethlehem City Water Company. The Bethlehem Water Works is owned by the borough; established in 1761, it is said to be the second oldest water works system in America, and was purchased by the borough in 1872.

The spring is located near the principal thoroughfare of the town and is about 100 feet from Monocacy Creek. The water is pumped to two standpipes from which the water flows by gravity through the piping system. There is practically no period for subsidence, as is shown by the fact that the spring supply is almost daily exhausted. The information as to the existence of this epidemic was received from an officer of the Engineering Division who was investigating an additional supply for which application had been made by the borough authorities.

The supply to West Bethlehem is taken from the Lehigh River, is filtered, and has upwards of 24 hours subsidence.

There is no sewerage system. It is customary to dig a hole until a crevice in the lime rock is found, which becomes an individual sewage disposal plant. It was impracticable to determine the number of these cesspools; many are said to have been in use as long as Bethlehem has existed. The pitch of the lime stone formation is somewhat northeast and southwest. Unquestionably the drainage from the cesspools finds its way into the spring water supply.

Diarrhoeal disease is said never before to have been so prevalent; however, that it occurred in excess is asserted by several of the most careful medical observers. Reported cases of typhoid fever indicate that the disease was not in excess of similar municipalities. Records of cases by weeks of reports are as follows:

	1909	1910	1911
January,	0	6	0
February,	0	2	0
March,	0	3	0
April,	4	2	1
May,	0	0	1
June,	1	1	1
July,	0	1	1
August,	1	3	18
September,	1	2	70
October,	3	6	18
November,	2	3	1
December,	0	1	.....
Total,	12	30	112

A list of all cases of diarrhoeal type under the care of physicians practicing in Bethlehem totaled 1,788. It was not possible to secure the names of half of these patients. It was required that all cases should be reported to the Secretary of the local Board of Health, and should be made in writing as epidemic dysentery, in accordance

with Section 1, Act of Assembly, dated May 14, 1909. Four hundred and eight cases were so reported and the analysis forms the basis of this report. The tabulation follows:

Epidemic Dysentery.

Age.		
0 to 4,	.....	60
5 to 9,	.....	29
10 to 14,	.....	20
15 to 19,	.....	31
20 to 24,	.....	47
25 to 29,	.....	27
30 to 34,	.....	29
35 to 39,	.....	20
40 to 44,	.....	31
45 to 49,	.....	15
50 to 54,	.....	21
55 to 59,	.....	22
60 to 64,	.....	18
65 to 69,	.....	12
70 and over,	.....	19
Information refused,	.....	7
		<hr/>
Males,	.....	193
Females,	.....	215
		<hr/>
		408

Water.		
Borough water (Bethlehem),	.....	355
Bethlehem city water (South Bethlehem),	.....	6
Cistern	..... 37	
Ross common,	..... 2	
Dug well,	..... 1	40
Information refused,	.....	7
		<hr/>
		408

A careful analysis of 34 of the 46 persons who denied the use of Bethlehem Borough water indicates a reasonable percentage of error, a number were under 12 years of age and a number admitted that it was possible for them to have used it prior to having knowledge of the outbreak.

Nearly all affected persons residing in West Bethlehem spent business hours in old Bethlehem.

Ice		
Artificial ice used,	.....	313

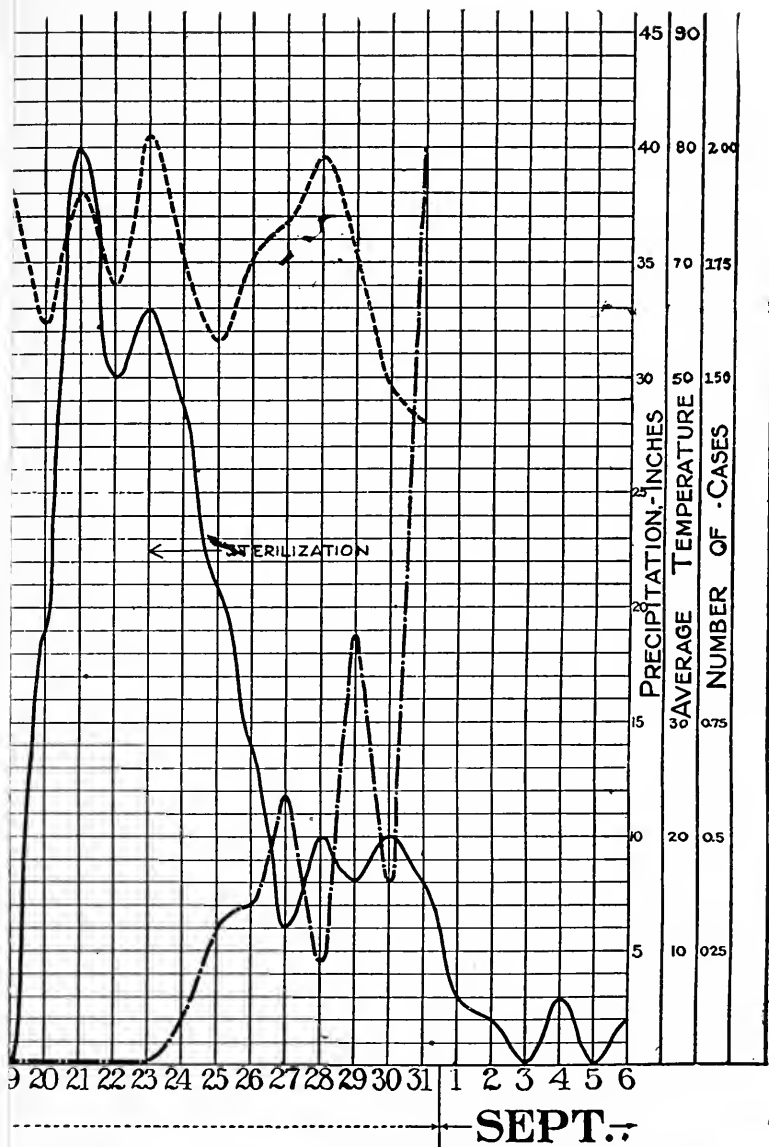
Milk.		
Various supplies,	.....	2
Not given,	.....	14
Own cow,	.....	2
Bader,	.....	13
Biery,	.....	22
Sutter,	.....	34
King,	.....	22
Best,	.....	34
Lafaw,	.....	23
Hess,	.....	25
Gerbach,	.....	5
Woodring,	.....	7
Koehler,	.....	20
Heighley,	.....	12
Kraut,	.....	22

Johnson and Bass,	2
Hess and Bosswiler,	5
Gerlach and Cloverleaf Dairy,	2
Please,	3
Cloverleaf Dairy,	8
Ziuk,	12
Glace,	19
Johnson,	11
Mertz,	3
Fenstermacher,	1
Balsehigh,	1
Kithline,	11
Marstetter,	2
Bosweiler,	6
Moser,	25
Yellow,	10
Kromer,	1
Bachman,	1
Kruege,	1
Malted milk,	1
Condensed milk,	4
Boehm,	1
Bowden,	1
Gerloch,	6
Daly's store,	5
Child's store,	3
Ruth,	1
Cunningham,	2
36 milkmen.	
14 not given.	
2 stores.	
2 can supply.	
2 own supply.	
2 various supplies.	

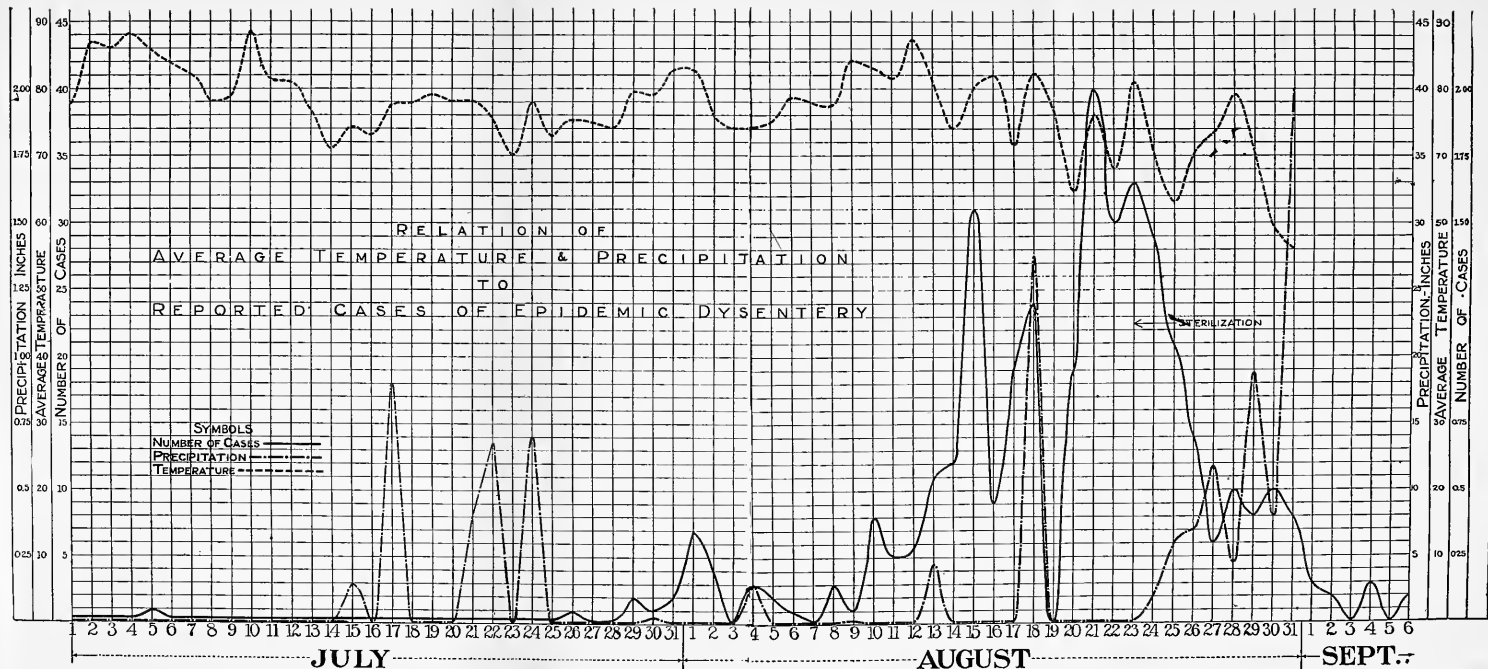
Ice Cream.

Heibergh,	29
Ruth,	96
None,	164
Heiser,	8
Routh,	39
Homemade,	21
East End Pharmacy,	7
Shrader,	1
Grash,	14
Molls,	1
.....	4
Britton,	3
Knolls (Butztown),	4
Unangst's Drug Store,	1
Mrs. Smith,	1
W. G. Heim,	2
Delmonico,	2
Middaugh,	3
Horn,	1
	<hr/>
	401
Information refused,	7
	<hr/>
	408
No ice cream used,	164
Information refused,	7
18 sources of supply for	237

A large number of physicians attributed the disease to temperature and other meteorologic disturbances. For this reason a study was made of the relation between dates of onset, average temperature, and precipitation; the date of sterilization of the water also is shown and its relation to the subsidence of the epidemic.



emic. The relation between the date of sterilization of the borough water-supply



Curves showing the relation between the rainfall in inches, average daily temperature and the dates of onsets of 408 cases of acute bacillary dysentery in the Bethlehem epidemic. The relation between the date of sterilization of the borough water-supply and the decrease in the number of reported cases should be noted.

Dates of Outset.	Temperature			Precipitation (in inches)
	Minimum	Average	Maximum	
July 1,	88	67	77.5	
July 2,	98	76	87	
July 3,	100	73	86.5	
July 4,	99	78	88.5	
July 5,	69	76	86	
July 6,	96	72	84	
July 7,	93	73	83	Heavy electrical storm
July 8,	83	74	78.5	
July 9,	91	67	79	
July 10,	97	80	88.5	Heavy electrical storm
July 11,	92	71	81.5	
July 12,	91	71	81	
July 13,	88	66	77	
July 14,	77	65	71	Heavy electrical storm
July 15,	89	60	74.5	0.16
July 16,	88	69	73.5	
July 17,	83	72	77.5	0.91
July 18,	80	75	77.5	
July 19,	82	76	79	
July 20,	84	73	78.5	
July 21,	85	72	78.5	0.41
July 22,	80	71	75.5	0.68
July 23,	85	56	70.5	
July 24,	87	70	78.5	0.71
July 25,	85	62	73.5	
July 26,	82	69	75.5	
July 27,	83	67	75	
July 28,	79	62	74	
July 29,	89	70	79.5	
July 30,	87	79	79	0.01
July 31,	89	77	83	

Dates of Onset	Cases.	Temperature			Precipitation (in inches)
		Maximum.	Minimum.	Average.	
August 1,	7	87	79	83	
August 2,	4	86	65	75.5	
August 3,	2	79	69	74	0.14
August 4,	3	82	67	74.5	0.01
August 5,	1	86	71	78.5	
August 6,	3	84	70	77	
August 7,	1	90	79	84.5	0.01
August 8,	8	94	72	83	
August 9,	5	89	74	81.5	
August 10,	5	96	79	87.5	
August 11,	11	75	73	74	0.21
August 12,	11	89	72	80.5	
August 13,	31	83	81	82	
August 14,	9	86	67	71.5	
August 15,	19	90	75	82.5	1.38
August 16,	24	84	70	77	
August 17,	19	78	51	64.5	
August 18,	49	82	70	76	
August 19,	30	84	52	68	
August 20,	33	90	72	81	
August 21,	29	75	67	71	0.11
August 22,	21	68	59	63.5	0.31
August 23,	14	78	63	70.5	0.36
August 24,	6	75	72	73.5	0.61
August 25,	10	86	71	78.5	0.23
August 26,	8	81	61	71	0.94
August 27,	10	64	55	59.5	0.41
August 28,	8	59	53	56	2.03
August 29,	3				
September 1,	2				
September 2,	3				
September 3,	2				
September 4,	2				

June and July onsets not given—6.

Studies of these patients showed a wide range of mild to severe symptoms. The average patient gave the history of abdominal cramp-like pains, sudden in onset and followed by watery evacuations and prostration. An increase in temperature, tenesmus, blood in the stools, anorexia and great thirst were noted in more severe cases. Many were so mild that no physician was called and the daily routine was followed.

Examination of the stools showed the presence of *B. enteritidis* (Gaertner), *B. acidi lactici*, *B. pseudo-typhosus* (Kruse), and a strain of dysentery type described by Rosen.

The analysis of the spring water supply showed, in addition to *B. coli communis*, the presence of *B. alkaligenes*, *B. suicidus*, *B. acidi lactici*, and *B. dysenteriae* (Rosen).

The blood of seven carefully selected cases of acute dysentery agglutinated the last named micro-organism in dilutions 1:50, which was the only dilution employed; reactions with *B. poelsii* (recovered from water and feces in the Chester outbreak) *B. para coli*, *B. dysenteriae* (*Shiga*) and *B. enteritidis* (Gaertner) were negative when studied in the same dilutions.

During the subsidence of the epidemic of dysentery, a number of clinically ill defined cases came to the attention of several physicians. I was able through the courtesy of the latter to study 20 of these patients. The analysis follows:

Dates of Onset.

July 6,	1
August 6,	1
August 8,	1
August 10,	2
August 12,	2
August 14,	4
August 15,	3
August 16,	1
August 17,	3
August 20,	1
August 23,	1
	<hr/>
	20

Ages

0 to 4,	1
5 to 9,	2
10 to 14,	2
15 to 19,	3
20 to 24,	5
25 to 29,	2
30 to 34,	1
35 to 39,	3
40 to 44,	0
45 to 49,	1
	<hr/>
	20

Sex

Males,	10
Females,	10
	<hr/>
	20

A diagnosis, based on the clinical findings and confirmed by agglutination reaction of the blood, was Para-typhoid Fever in six cases.

The blood findings were as follows;

B. typhosus only,	7
B. paratyphosus B. only,	6
B. paratyphosus B. and B. typhosus,	1
Negative,	1
Not examined,	5
	<hr/>
	20

Case No. 1, onset July 6th, acquired his infection in a distant state; case No. 4 was secondary to No. 1. All others were apparently infected in Bethlehem.

An epidemiologic prognosis was made for Dr. H. J. Laciard, President, and J. M. Leibert, Secretary of the local Board of Health, that there would be upwards of 100 cases of typhoid fever reported during the next few weeks, that the cases were already infected but that further infection had been prevented by sterilization of the water supply. An hypochlorite of lime treatment plant had been installed and was being operated under the direction of an officer of the Engineering Division.

The dates of reports by weeks are as follows:

September—	
1st week,	3
2nd week,	7
3rd week,	21
4th week,	34
Fraction week,	5
October—	
1st week,	4
2nd week,	3
3rd week,	5
4th week,	6
	<hr/>
	88

MORTALITY.

The number of deaths attributed to Bacillary Dysentery was 7; to typhoid fever, 11.

Excluding Cases No. 1 and 4 there was a morbidity of 106 typhoid fever between the dates of August 6th and October 28th. The per cent. mortality of the typhoid fever outbreak was then 10 per cent.

ACTION AND RECOMMENDATIONS.

An hypochlorite of lime treatment plant was installed on August 24th and was immediately placed in operation. A warning was issued by the local Board of Health that all water from the public supply should be boiled for at least 20 minutes before applying to domestic use.

As your representative I met with the Board of Health, acquainted them with the results of my investigation and gave them the prognosis referred to above. The measures necessary to prevent secondary cases were discussed in considerable detail. The importance of destruction of all discharges was emphasized and the assistance of the State Department was offered, should there be any need.

The members of the Board of Health were interested, energetic and seemed fully qualified to take charge of local conditions as they developed. By your direction I withdrew on and after September 14th, 1911.

ESTABLISHING DIAGNOSIS IN CASE OF POLIOMYELITIS, HARRISBURG, PA., AUGUST 26, 1911.

On August 26th I visited a patient in consultation with Dr. M. I. Wolford, of Harrisburg, in which he had made the tentative diagnosis of poliomyelitis.

The patient, Anna Hohn, aged six years, the daughter of L. J. Hohn, residing at 1072 S. Cameron Street, Harrisburg. The history obtained from the father and mother was entirely negative until August fifteenth. On this date the patient showed certain symptoms which the mother had interpreted as fever and malaise. On the sixteenth and morning of the seventeenth she was unusually active and seemed well in every particular, and on the evening of the seventeenth there was a marked relapse into the former condition which grew continuously worse until August 23rd, when for the first time a marked weakness of both legs and especially the left leg and, of the right arm, was noticed. On Saturday, August 19th, Dr. L. M. Wolford called but observed no evidences of paralysis. The temperature fluctuated considerably, the highest recorded being 103.2-5 degrees. During the morning marked irritability, with a history of soft, mushy stools having an offensive odor, were noted. Coincident with the appearance of paralysis on the 23rd the child complained of pain in the extremities and back. The eyes were somewhat staring in character but there were no indications of paralysis of the ocular muscles. There was no unconsciousness or delirium. The tongue deviated slightly to the right but there were no indications of laryngeal or pharyngeal involvement. The paresis seemed to be limited to the deltoid muscles on the right side and to both lower extremities. Examination on the 26th showed the following:

The right upper extremity showed complete motor paralysis of all muscles except the extensor group for the fingers. Pain sensation was retarded to a moderate degree. Pressure sense showed no change. Reflexes were not determined.

Upper left extremity showed complete motor paralysis except extension and flexion of the fingers. There was marked reduction of power.

The lower right extremity showed complete motor paralysis except for slight rotation of the thigh on trunk, was slightly exaggerated. Deep reflexes were absent. Plantar reflexes somewhat exaggerated. Babinski sign negative.

The lower left extremity showed motor paralysis except for rotation of the thigh and flexion of the toes. Superficial reflexes were active. Deep reflexes were absent. Babinski sign negative. Pain sensation somewhat retarded. Pressure sense slightly exaggerated.

There was a moderate degree of spinal rigidity. A marked positive Kernig sign on both sides. The abdomen was slightly distended and tympanic. The sphincters were negative. At this date the temperature was 102 and pulse 140. A diagnosis of acute poliomyelitis was made. Specimens of blood were secured on culture media and in Widal tube. The report from the Laboratory Division shows the presence of the micro-organism discovered in the blood of cases of poliomyelitis and described in the special Bulletin issued in March, 1911.

INVESTIGATION OF THE SOURCES OF DYSENTERY AND TYPHOID FEVER IN THE BERKS COUNTY TUBERCULOSIS SANATORIUM, SEPTEMBER, 1911.

In accordance with your instructions I investigated the reasons for the incidence of dysentery and typhoid fever in the Berks County Tuberculosis Sanatorium on September 7th. This investigation was made in response to the request to you from Dr. Addison May Rothrock, Superintendent.

The Sanatorium, maintained by the citizens of Berks County, is located on Neversink Mountain, outside the limits of the City of Reading, in Lower Alsace Township, and consists of a building devoted to the care of the patients, an open air pavilion, residence of the Superintendent and his family, stables and a few out buildings. For many years and up to the early months of 1910 it was maintained as a roadside hotel. All buildings are of wooden structure and are so arranged that the Sanatorium proper, pavilion and stables are elevated above the principal source of water supply and the residence

of the Superintendent. The premises are located on the side of the mountain, the drainage being efficient and thorough because of the short downward slope toward the valley in which Reading is located.

The water supply is obtained from two sources. First, the Main Spring, which is located on the downward slope about 180 feet below the Sanatorium and about 25 feet from the residence of the superintendent. This source of water supply is about 210 feet distant from and about 50 feet below the level of privy vault (1) and 150 feet distant and 30 feet below the level of cesspool (2) referred to below. Drainage from these two points of previous sewage disposal would be directly into the porous soil from which the ground waters collect and form Main Spring.

The geologic formation from which the waters collect is open porous soil, containing some shale; the capacity of the spring varies from 0 to 2,200 gallons a day and averages throughout the year less than 2,000 gallons. It is walled in at all points except at the point of collection by concrete formation, forming a tank 5 feet in depth from overflow to the bottom; it is 6 feet 3 inches from the bottom to the coping, which is one foot above the ground at all points. It is 14 feet in diameter. On the upper side a protecting wall of solid concrete has been erected to the height of 10 feet. The last time the spring was cleaned was in July, 1910, when it was thoroughly scraped.

2. A well 58 feet deep and 2 feet in diameter located on the upper side of the Sanatorium proper and walled with loose stone, is on the same level and about 100 feet distant from an old privy vault (1) which will be described later. There is rarely more than 10 feet of water in the well, as above this amount it loses by seepage through the porous soil. In excavating no rock was found.

The water from these two sources of supply is raised by gasoline engine pump to a wooden (zinc lined) tank located on the third floor of the Sanatorium proper. This tank holds when full 700 gallons. From this the water is distributed by gravity throughout the various buildings.

Points of Sewage Disposal. 1. A privy vault 20 feet in depth was maintained in close proximity to the sanatorium prior to alterations for its present purpose and is on the same level as the well mentioned above. It had been last used by workmen, during alterations made in the winter of 1909 and spring of 1910. It was disinfected with fresh, unslacked lime and filled with ground during April of 1910. It is probable that percolation occurs directly from this old vault into the well from which part of the present water supply is obtained and also into Main Spring.

2. A cesspool walled with loose stone 20 feet deep was used by the occupants of the building during the summer of 1909. It was disinfected with lime and taken out of service in April, 1910.

3. A privy vault located on the side of the hill below the residence of the Superintendent was discontinued after disinfection in October of 1910.

4. All sewage and other wastes at the present time are disposed of by a sanitary collecting sewerage system and carried to a point some 250 feet below the residence of the Superintendent where a tank and affluent tank with treatment apparatus are kept in constant use. It is impossible for the present method of sewage disposal to be the cause of disease in the institution.

The number of patients average from 20 to 30 and are under the direction of the Superintendent and nursing staff and six employees. During April and May, 14 or more employees are in service in the vineyards.

The history of previous typhoid fever among the residents, patients and employees discloses certain interesting facts. Every one of the 21 patients so far admitted had typhoid fever at some time between childhood and a year before admission. Two cases who had the disease during childhood—G. W., aged 38 years, and C. N., aged 26 years, were among those who developed what was probably bacillary dysentery. In addition, one nurse, one cook and three children in the Superintendent's family developed the same disease between May and July, 1911. Three employees who had previously not had typhoid fever developed the disease with the following dates of onset:

A. M.,	female,	aged 42,	7-6.
A. D.,	"	"	22, 7-20.
C. J.,	male,	"	21, 7-22.

These three patients obtained most of their food and water supply at the Institution but occasionally visited Reading though, as a rule, but for a few hours.

A careful investigation of the food supplies to the Institution showed the following: The entire milk supply is obtained from Toole Bros., managers of the Keystone Creamery, Reading. They obtain all of their milk supplies from the Swartz Dairy in Exeter Township, the Raudenbush Dairy in Cumru and the Guilden Dairy in Birdsboro Borough. There have been no cases of communicable disease reported in residents or employees on these various sources of milk supply, nor among the employees of the Keystone Creamery. Ice is obtained from the Reading Cold Storage Company and is manufactured from sterilized water. The vegetables, prior to July 15th, were obtained from D. J. Reninger, a farmer living at Stony Creek, Exeter Township, from a wholesale trucker who handled southern vegetables and from a farmer in Lower Alsace Township.

Samples of water were collected and forwarded to the State Department Laboratories, results of which are given below.

	Bacteria per c. c.	B. Coli per c. c.
Spring intake Berks County,	1200	33
Tub. San., Reading		
Well Pump, Berks County. Tub. San.,	40	1
Main Kitchen Tap Berks Co., Tub. San.,	60	4
Bottom Water Tank, Berks Tub. San.,	50	0
Tap in Supt. House, Berks Co. Tub. San.,	200	0

It is obvious, from the analysis of the conditions in relation to the gastro-intestinal disease occurring in this Institution, that the sources of water supply from a loose porous soil in close proximity to points of previous sewage disposal are dangerous to the health of the residents and was the probable cause of dysentery and typhoid fever.

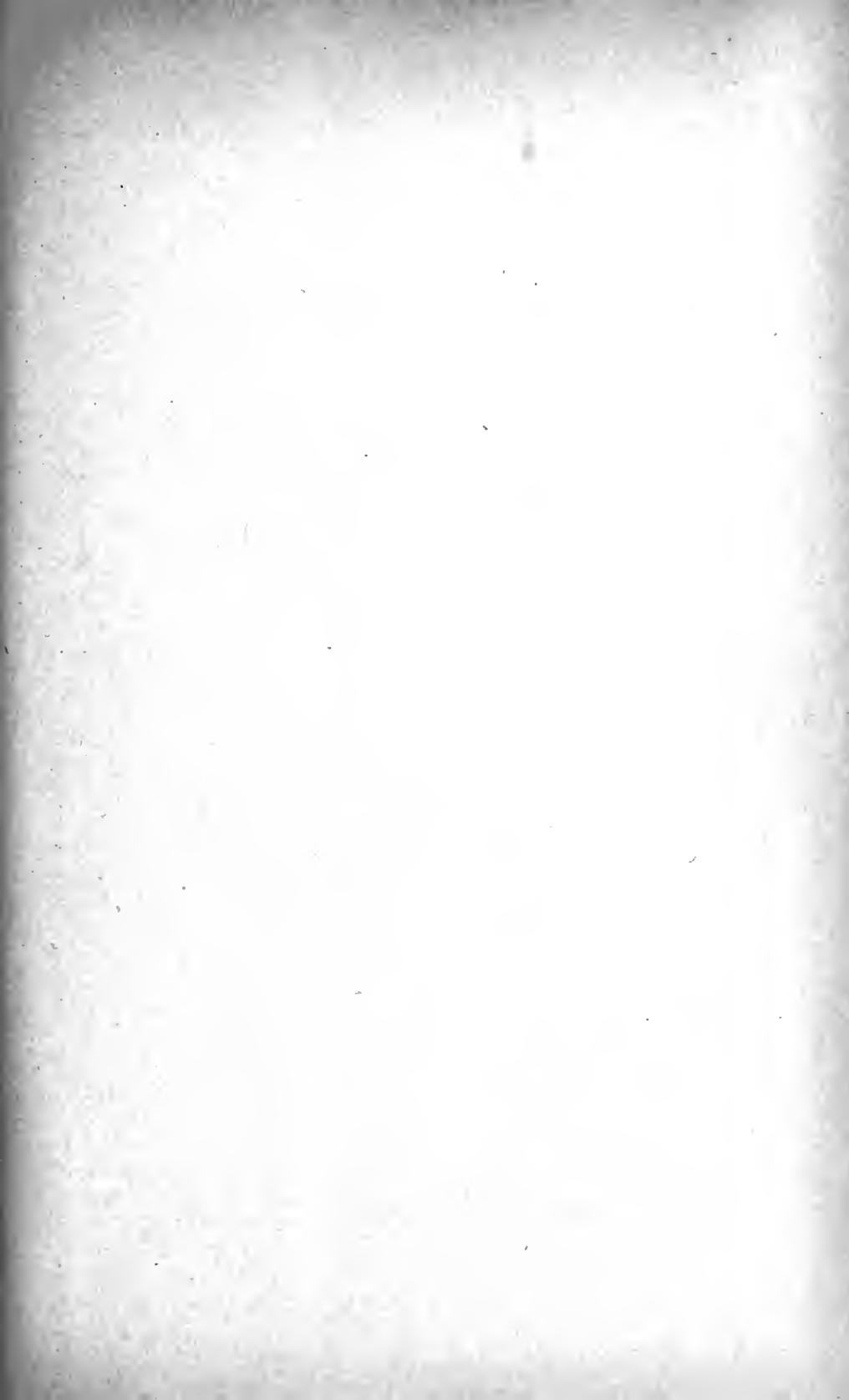
A recommendation was made to the Superintendent, Dr. A. M. Rothrock, that he should boil all water supplies in use for all purposes and that one of two plans should be followed. 1. To secure a safe water supply from a source high up on the mountain side where springs are said to exist, or 2, to use a treatment plant at the storage tank on the third floor of the sanatorium.

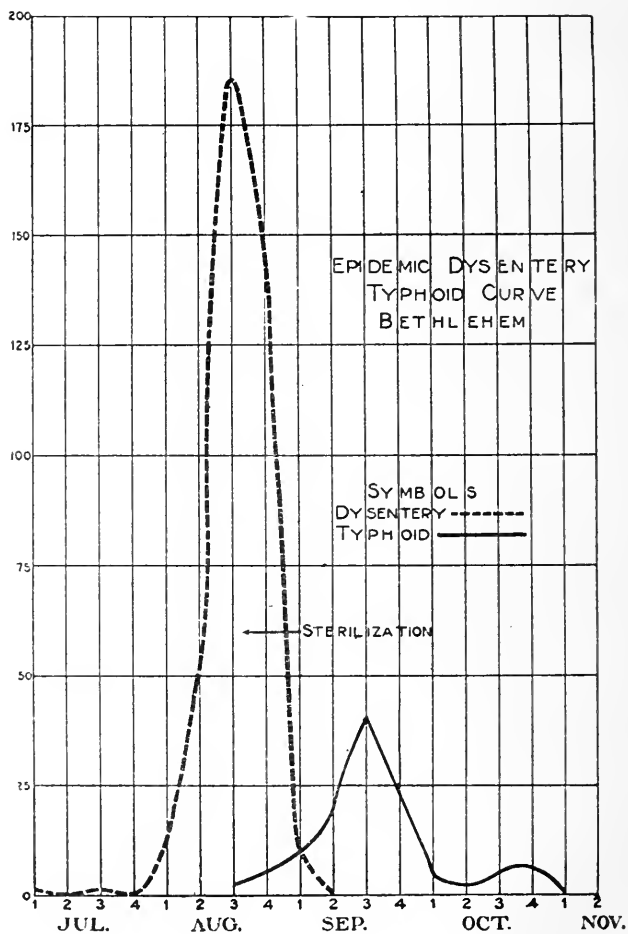
Dr. Rothrock very much appreciated your assistance in investigating the source of infection and has taken immediate measures to abate the same.

REPORT OF INVESTIGATION OF TYPHOID FEVER IN SOUTH BETHLEHEM AND VICINITY, SEPTEMBER AND OCTOBER, 1911.

In accordance with your instructions, I proceeded to South Bethlehem, Northampton County on October 1st, 1911, in order to investigate the reported prevalence of typhoid fever in that borough. I was accompanied by Assistant Engineers W. H. Ennis, R. E. Irwin and R. B. Styer, by Special Inspector I. M. Ziegler and by Sanitary Inspectors J. H. Silliman, H. A. Miller, Daniel Zellers and J. M. Hellings.

Your attention is respectfully directed in a report of an epidemic of Bacillary dysentery occurring in the neighboring borough of Bethlehem, investigated during August and September, during which an epidemiologic prognosis in relation to the occurrence of typhoid fever was made. The cases of typhoid fever occurring in South





Bethlehem are reviewed in addition to those occurring in South Bethlehem; therefore, the studies of all cases occurring during the months of August, September and October in the following localities are presented; there was reason to believe that a number of persons suffering with the disease had become infected either in Bethlehem or South Bethlehem Borough.

Borough or Township.	Population.	Cases.
Allentown Hospital, Allentown, Lehigh Co.,	51,913	25
Catasauqua Borough, Northampton Co.,	5,250	1
Fountain Hill Borough, Lehigh Co.,	1,388	2
Freemansburg Borough, Northampton Co.,	867	4
Nazareth Borough, Northampton Co.,	3,978	2
Northampton Heights Borough, Northampton Co.,	1,037	5
West Bethlehem, portion of Bethlehem Borough,	4,473	1
Bethlehem Township, Northampton Co.,	3,414	14
Hanover Township, Lehigh Co.,	3,907	10
Lower Saucon Township, Northampton Co.,	3,875	7
Salisbury Township, Lehigh Co.,	2,828	1
Bethlehem Borough (including W. Bethlehem),	12,837	107
S. Bethlehem Borough,	19,973	83

This total of 262 cases and their relation to sources of infection form the basis of this report. The cases occurring in South Bethlehem are given in detail and the report of the investigation of the principal water supplies is presented in a report from the Engineering Division.

South Bethlehem.

The principal enterprises in South Bethlehem are the Bethlehem Steel Company's Works, which employs somewhat over 8,000 persons, and the Lehigh Valley Steel Company's Works, employing several hundred persons, and which had two plants known as the Gallea Plant and the Lloyd Mills. In addition, there are machine works, knitting, ribbon and silk mills, cigar and box factories, employing about 2,500 persons.

Water.

The water supplies are:

First. The Bethlehem City Water Company, which takes its supply from the Lehigh River, the supply being filtered and having upwards of four days subsidence before its distribution by gravity throughout the Borough of Bethlehem, West Bethlehem, portion of Bethlehem Borough, Northampton Heights and Fountain Hill Borough, and the following townships: Hanover and Salisbury Townships, Lehigh County, and Bethlehem and Lower Saucon Townships, Northampton County. An efficiency test of the Water Company's plant was made on and after September 19th by Engineers Ennis and Styer. It was during the latter part of their investigations that the outbreak of typhoid fever in Bethlehem came to their attention. This water is supplied to some 20,000 consumers and the number infected who were supplied with this water is noted in the final tabulation of all cases.

Second. The Bethlehem Steel Company obtains its water supply from the Lehigh River for manufacturing purposes and from springs for drinking purposes. The springs are located on the Steel Company's lands in South Bethlehem, about 800 feet south of the Lehigh River. From the river southwards, a distance of somewhat more than one-eighth of a mile, the ground surface is more or less level and very little elevated above high water stages; the major portion of this is filled-in ground. This level stretch is broken more or less abruptly by a rise to a point beyond the borough limits. The source of the springs is in lime-stone rock and the supply is estimated to be about 350,000 gallons per day. The flow of the Steel Company's springs is said to be affected by rainfall but not necessarily by a rise in the river water. The elevation of the spring water is reported to be somewhat lower than the ordinary river water level.

At the plant the springs are enclosed in substantial masonry structure about 24 feet square, roofed over and amply protected from drainage or overhead contamination. The water is pumped into a distributing system and is the source of drinking water for all of the employees of the plant and for fire protection. Drinking fountains are provided throughout the works and in every building; no common drinking cups are allowed. The information received from the officers of the Company is to the effect that there is no connection with the spring supply and the Lehigh River supply which is used for manufacturing purposes.

Third. The supply of the Lehigh Valley Silk Company's Works, which employs several hundred persons, is obtained from a drilled well at the Gallea Plant and from springs at the Lloyd Mills. The latter springs have their source in the mountain side in Lower Saucon Township, Northampton County, just south of the South Bethlehem Borough line. The water is conducted from the springs through open ditches about 200 feet long, leading to a storage reservoir and from thence by gravity for one-half mile to the Lloyd Mills. About 600 feet above is the house of S. B., with four occupants. This property pollutes the spring but no illness has occurred in the members of the household during occupancy. Drainage from other premises may in storm periods gain access to the ditch conduit. The water supply for the Gallea Plant and the Lloyd Mills is used both for manufacturing and drinking purposes.

Fourth. The reports of the investigation of the Borough Water System in Bethlehem Borough, which was the principal source of infection of all cases occurring in that borough have been presented in my report of investigations made in that borough during August and September and in an additional report of the Engineering Division.

Sewage Disposal.

A system of combined and sanitary sewers is maintained in the principal portion of the town with some extension to outlying portions of the borough. All other properties are provided with cesspools of the sink hole type or with privies.

The section of the borough above the Bethlehem Steel Company Springs is thickly populated; upwards of 25 per cent. use cesspools or privy vaults. Kitchen wastes and wash water are discharged to the ground surface and from that point to storm water gutters. All surface drainages from this area are conveyed by means of a masonry culvert through the premises of the Steel Company and pass within 100 to 125 feet of the Company's Spring. While the culvert is probably on higher elevation than the springs it is not reasonable to believe that the culvert contents pollute the water supply.

A tabulation of the causes of all cases residing in the Borough of South Bethlehem is as follows:

Months.	Onsets.	Cases.	Total.
July 4,		1	1
August 6,		1	
August 16,		1	
August 19,		1	
August 24,		1	
August 25,		4	
August 26,		1	9
September 1,		2	
September 2,		3	
September 3,		2	
September 4,		0	
September 5,		2	
September 6,		2	
September 7,		2	
September 8,		5	
September 9,		2	
September 10,		3	
September 11,		0	
September 12,		2	
September 13,		1	
September 14,		4	
September 15,		6	
September 16,		5	
September 17,		3	
September 18,		5	
September 19,		2	
September 20,		4	
September 21,		1	
September 22,		1	
September 23,		3	
September 24,		0	
September 25,		4	
September 26,		1	
September 27,		0	
September 28,		1	
September 29,		1	
September 30,		0	
Total,			67

ONSETS—CONTINUED.

Month.	Cases.	Total.
October 5,	1	
October 6,	2	
October 14,	1	
October 18,	1	
October 20,	1	
Total,		6
Total number of cases,		83

Morbidity.

Total morbidity,	83 Cases
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Mortality.

Total mortality,	7 cases or 8.4%
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Age.

0 to 4,	0
5 to 9,	3
10 to 14,	0
15 to 19,	7
20 to 24,	24
25 to 29,	20
30 to 34,	18
35 to 39,	3
40 to 44,	6
45 to 49,	1
50 and over,	1
	83
Male,	76
Female,	7
	83

Occupation.

Heater,	1
Student,	3
Laborer,	62
No occupation,	1
Cigar maker,	3
Tailor,	1
House wife,	2
Silk worker,	1
Conductor,	1
Nurse,	1
Pattern maker,	1
Boiler worker,	2
Barber,	1
Plumber,	1
Machinist,	1
Domestic,	1
	83

Employment.

Public School,	1
Bethlehem Steel Co.,	67
Boynan Bros. Cigar Co.,	1
Bondy and Setler, Allentown,	2
Snellen and Snyder, Bethlehem,	1
Lipps Silk Mill, South Bethlehem,	1
Lehigh University,	1
St. Luke's Hospital,	1
Parochial School,	1

Total Population.

73 Houses,	715 Persons
66 Houses with 1 case each.	
9 Houses with 2 cases each.	

Visits.

Visits to other cases,	2 instances
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Water.

At Home—

South Bethlehem Borough,	77
Cistern,	8

At work—

Steel Company,	67
Borough,	8
Allentown,	2
Bethlehem Borough (Municipal)	3
Lipps Silk Mill supply,	3
Various,	2

South Bethlehem Borough water and Bethlehem Steel Company water,	63
South Bethlehem Borough water only,	5
South Bethlehem Borough and Allentown water,	2
South Bethlehem cistern and Bethlehem Borough water,	2
South Bethlehem Borough and Bethlehem Borough water,	2
Cistern and Bethlehem Steel Company water,	2
South Bethlehem Borough water and Lipps (L. V. silk mill spring) Cistern and various,	3
Unstated,	2

To recapitulate—

- 72 used waters known to be polluted.
- 9 used waters not known to be polluted.
- 2 unstated.

Milk.

Unstated,	3
Konzer,	1
Hallman,	10
Murphy,	2
Conrad,	5
Newell,	1
Pole,	11
Seigfried,	1
Koceszy,	11
Schrier,	10
Byrne,	4
McGowen,	1
Myer,	3
Beres,	2
Bennick,	3
Larola,	1
Geis,	1
Rowe,	1
Various,	2
Gillespie,	2
Werth,	2
Verner,	1
Sigaly,	1
Koser,	1
Csondor,	3
Beth. Sanitary,	1
Weirbach,	1
None,	1
Childs,	1
Boyer,	1
Gallo,	2
Roeriziks,	2

Receptacles.

None,	1
Bottles,	2
Cans,	72
Unstated,	8
	<hr/>
	83

Disinfection of Dishes, etc.

52 Did not use disinfectants.
 31 Questionable.

Disinfection of Excreta.

Positive,	15
Negative,	68
	<hr/> 83

Sewer Connections.

Connected,	19
Cesspool,	5
Privy,	56
Buried,	3
	<hr/> 83

This tabulation discloses the following prominent features—that 80 per cent. showed dates of onset during the month of September; that 86 per cent. were from 18 to 40 years of age; that 70 per cent. were males; that 74 per cent. were employed in the Bethlehem Steel Company's Works, and that 86 per cent. are known to have used polluted water.

The conclusion drawn from this study is to the effect that the principal source of infection is from the spring water supply on the premises of the Bethlehem Steel Company, a total of 67 per cent. having used this water, and that a much smaller proportion—about 13 per cent—drank water supplied by Bethlehem Borough and were some of the cases infected prior to the sterilization of the water in that borough. It is evident that the Bethlehem City water supply was not the medium of transmission as only 5 of the 83 cases drank this water only, while the Company was supplying at that time some 20,000 consumers; and further, that the cases were not distributed in such a way as to suggest the distribution of the water supply.

Other cases of typhoid fever had existed during July and August in the section of the borough referred to above as being on the drainage area of the Bethlehem Steel Company's springs. These cases in this locality seem to bear a direct relation to the localized outbreak of which this is the report.

It is said that the flow of the Steel Company's spring is affected by rainfall and this is clearly demonstrated by observing the total count of bacteria in the water following an unusual precipitation. The analysis of this water had been made in September coincident with an efficiency test of the Bethlehem City Water Company's supply. From these records we note that between the dates of September 21st and September 27th inclusive, the highest total count was 600 with the greatest *B. coli* count of 1. This coincides with the period of little or no rainfall. On September 28th there was 0.93 inches and on October 1st the total bacterial count was 800. On this lat-

ter date there was $2\frac{1}{2}$ inches precipitation. The results of the examinations of samples collected on October 2nd show a total of 2,400 bacteria with 48 *B. coli* present in each c. c.

Unquestionably the sewage organisms from the sink hole type of cesspool and privies were the source of contamination of the Steel Company's water supply.

There were 43 dairies supplying milk to dealers in South Bethlehem. Each one of these dairies was investigated and in the majority of instances the sanitary conditions were fair. No cases of gastrointestinal disease were discovered on any dairy nor could the history of any such cases be obtained. The milk was obtained from 29 local sources of supply for 77 cases; from various sources for 2 cases, while 1 used no milk and 3 are unaccounted for.

The attention of the local Board of Health was called to the excess of typhoid fever on or about September 22nd by Engineers Ennis and Styer. On September 26th the Board called upon the State Department of Health for assistance.

The Board consists of the following:

Dr. N. Ziegenfuss, President.

S. B. Keener, Secretary.

C. A. Jacobs.

Thos. Kiernan.

Mark Devlin.

The President and Secretary gave all the information in their possession. There is considerable dissension between the Board of Health and the Borough Councils and the sphere of usefulness of the Board is markedly curtailed. Suits against the Borough are pending for a year's salary for the Secretary and Health Officer, and work is in part disorganized, the responsibility not being fixed. There was marked opposition to our supervision on the part of the authorities other than the Board of Health. By request, I met with and addressed a meeting of Councils, the Burgess, O. L. Peysert, and others. It was gratifying to have the cordial co-operation and support of the Burgess.

Councils had inaugurated the erection of an Emergency Hospital; this was completed on the evening of October 4th. The location in an elevated portion of the Borough was well chosen; there was some difficulty in arranging for sewage disposal as it was not possible to have sewer connections without having extensions made. Cesspools in porous soil were sunk on the same property, adjacent to the bathrooms, and proved efficient for the total number of cases admitted.

Almost every case lived in insanitary lodging houses in a crowded district adjacent to the Steel Company's plant. Those urgently in need of isolation were removed to the Emergency Hospital or to the

St. Luke's Hospital up to the full capacity of the two buildings. The use of St. Luke's Hospital was extended to the Borough through the generous action of Dr. W. L. Estes.

The Bethlehem Steel Company desired to render every possible assistance and through the activities of Mr. B. H. Jones, Treasurer, your representative was authorized to secure a corps of nurses in the name of the Steel Company and to direct them in their work. Temporarily on October 2nd and 3rd, Miss Durkin, nurse in the State Tuberculosis Dispensary at Bethlehem, was pressed into service in order to make a preliminary census and to report on the conditions in relation to the needs of the district nurse work. Following her report, the following five nurses were obtained from Philadelphia and were apportioned to districts for duty—Miss Nellie Ferry, Miss Alice Toolen, Miss M. A. Taylor, Miss Alice M. Sheperd, and Miss Bessie H. Wright.

They were detailed, two to district nurse work to continue in this duty continuously from October 2nd to 11th inclusive, three to perform district nurse work from October 2nd to 5th inclusive, after which date they were on duty in the Emergency Hospital up to and including October 12th. The combined report of the duties performed by these nurses is as follows:

Total number of patients visited,	45
Total number removed to hospitals,	12
Total number of visits made,	299
Total number of deaths in field,	1
Total number of deaths in Emergency Hospital,	1
Total number of baths, (sanitary 37, temperature, 42),	79
Total population of 45 households,	409
Average number of persons per house,	9 4.10
Greatest number in any one house,	25
Least number in any one house,	2

Their reports indicate that the major number of cases occurred in premises with two or three rooms. Many homes have three shifts of men sleeping for eight hour periods in the same bed. A number of the homes were boarding houses for foreign born persons, and any one who was ill on the premises was treated as an extra burden for the care of the boarding house mistress. There was practically no ventilation; in but two of the 45 houses was there any attempt to air the rooms or to isolate the patients. Disinfection of the discharges and utensils used in the sick room was practiced in but five cases.

The results of the district nurse work showed such a marked improvement in sick room sanitation and in the general sanitary conditions in the premises that Mr. Jones expressed his desire to extend the services along this line as long as would be necessary in the judgment of your representative, and also desired to supply additional nurses if needed.

Up to and including October 12th, on which date the State Department's representatives withdrew, there had been 12 admissions with 1 death, to the Emergency Hospital. The usual sanitary provisions were carried out in detail under the supervision of the nurses provided through the generosity of the Bethlehem Steel Company.

On October 6th Mr. Jones expressed the desire to give anti-typhoid vaccine to the upwards of 10,000 employees, offering a building, vaccine, and all necessary assistance if it were undertaken. As the epidemic, so far as dates of onset were concerned, had subsided, it was not deemed advisable for the Department to take this work up at this time.

Under the direction of the Engineering Division a chemical test apparatus was installed at the Bethlehem Steel Company's pumping station on October 2nd and the water was thereafter sterilized with hypochlorite of lime and a similar plant was installed at the Bethlehem City Water Company's plant as an additional safeguard. The Lehigh Valley Silk Mill's spring supply was condemned and the supply for drinking purposes was disconnected, the Company establishing connection with the Bethlehem City Water Company's lines.

The Borough Councils were pressed to make such sanitary inspections and issue abatements as should be necessary and two men were appointed by the Borough for this purpose. They were accompanied by two sanitary inspectors of the State Department of Health and within a period of four days 1,824 properties were inspected, of this number 377 were unsatisfactory. Ninety verbal notices on 120 properties and 144 legal notices on 257 properties were served. It was necessary for the borough authorities to cause the arrest of 15 individuals who had not complied with the order. Of the total number, 342 properties were placed in a sanitary condition, 184 properties were cleaned and disinfected and the highways, including gutters, of the entire section were cleaned and limed.

A tabulation of the cases occurring in the Allentown Hospital, Catasauqua, Fountain Hill, Freemansburg, Nazareth and Northampton Heights Boroughs, Hanover and Salisbury Townships, Lehigh County, and Lower Saucon and Bethlehem Townships, Northampton County, is as follows:

Onsets.	Cases.
August 7-14,	2
August 15-21,	3
August 22-30,	3
September 1-7,	9
September 8-14,	16
September 15-21,	24
September 22-29,	10
October 1-7,	3
October 8-14,	1
October 15-21,	1
Total cases,	72

Age.	Cases.
0 to 4,	1
5 to 9,	4
10 to 14,	5
15 to 19,	9
20 to 24,	14
25 to 29,	13
30 to 34,	9
35 to 39,	7
40 to 44,	6
45 to 49,	2
Unstated,	2
Total cases,	72

Occupations.

Laborer,	3
School,	5
Bethlehem Steel Co.,	26
Lehigh Valley Silk Co.,	2
Moulder,	1
Plasterer,	1
Store, Bethlehem Borough,	4
Factory, Bethlehem Borough,	1
Teamster,	1
Unstated,	6
Contractor,	1
Allentown Silk Mill,	3
Railroader,	4
Housewife,	8
Racer,	2
Agents,	3
Lipps Silk Mill,	1
Total cases,	72

Water.

Allentown only,	4
Allentown and Bethlehem Steel Co.,	7
Allentown and Bethlehem Borough,	4
Allentown, South Bethlehem and Rittersville,	1
Emaus,	2
St. Paul, Minneapolis,	2
Bethlehem Steel and South Bethlehem,	8
Cistern and Bethlehem Steel Co.,	4
Dug well and Bethlehem Steel,	4
Cistern only,	3
Dug well and Lipps,	1
Dug well and Bethlehem Borough,	2
Cistern and Bethlehem Borough,	9
Bethlehem and Bethlehem Steel Co.,	1
Various,	8
Spring only,	1
Spring and Bethlehem Borough,	2
Spring and South Bethlehem Borough,	1
South Bethlehem Borough,	1
Bethlehem Borough,	1
Spring and Bethlehem Steel,	1
Allentown, Bethlehem and South Bethlehem,	1
Allentown and South Bethlehem Boro.,	2
Bethlehem Steel,	1
Bethlehem and South Bethlehem,	1
Total cases,	72

It will be observed that by dates of onset 8 cases occurred during August, 59 cases during September and 5 cases during October, making a total of 72 cases; 58 of the 72 cases were between 18 and 40 years of age, 59 were male, 13 were females; 26 were employed in the

Bethlehem Steel Company, 2 in the Lehigh Valley Steel Mill Company, while 5 had been employed in Bethlehem Borough. 58 of the 72 cases used water known to be polluted. There were 32 sources of milk supply for 44 cases. The milk supply for 28 cases was not accounted for.

In Bethlehem Borough the major number of cases were traced to the Borough Water Company's supply, for which a treatment plant was established in the borough water works and the sources of infection were eliminated. This is detailed in my report of September, 1911, on the prevalence of epidemic dysentery followed by typhoid fever in that borough. The reports of cases from the Borough of Bethlehem are as follows:—

	Cases.	Total.
July 28th,	1	1
August 7th,	0	
August 14th,	1	
August 21st,	13	
August 28th,	4	18
September 7th,	3	
September 14th,	7	
September 21st,	21	
September 28th,	34	
Fraction,	5	70
October 7th,	4	
October 14th,	3	
October 21st,	5	
October 28th,	6	18
Total cases,		107

A recapitulation of all cases studied shows that while two main but independent sources of infection were operative, they coincided almost to a day; the onsets by weeks are as follows:—

	Cases.
August 1-7,	1
August 8-14,	5
August 15-21,	16
August 22-31,	13
September 1-7,	25
September 8-14,	46
September 15-21,	65
September 22-30,	60
October 1-7,	10
October 8-14,	8
October 15-21,	6
October 22-31,	5

The treatment of the Bethlehem Borough Water Company and Bethlehem City Steel Company spring supply led to the prompt abatement of typhoid morbidity in the boroughs and townships studied.

Unquestionably a number of primary cases occurring elsewhere, acquired infection in Bethlehem Borough. It was not possible to extend the zone of investigation but the net results have been observed in watching the reports from the counties—Lehigh, Northampton and portions of Berks and Montgomery.

REPORT OF INVESTIGATION OF THE UNUSUAL PREVALENCE OF TYPHOID FEVER IN BENTON, COLUMBIA COUNTY, OCTOBER, 1911.

In accordance with your telephoned instructions I proceeded to Benton Borough, Columbia County, on October 16th, 1911, to investigate the reasons for the unusual prevalence of typhoid fever. A request for assistance had been received from Dr. J. S. Hoffa, Secretary of the Board of Health.

Benton is, for the most part, a resident community, with a population of 719 according to the census of 1910, and is located on the banks of Fishing Creek and on the Bloomsburg and Sullivan Railroad at a point north of Bloomsburg, the County Seat of Columbia County. Typhoid fever rarely appears in this community and the incidence of 9 cases during the course of two months gave reason for alarm to the local Board of Health. In addition, it was believed that there were undiagnosed and unreported cases other than those known to the Board of Health. The latter consists of the following:

J. E. Patterson, President.

Dr. J. S. Hoffa, Secretary.

J. B. Hess.

M. Yost.

C. L. Hirleman, Health Officer.

The water supply to this community is almost entirely from driven wells. The geologic formation is entirely gravel to a depth of some eight to ten feet, below which there is an average of two feet of hard-pan, followed by a gravel of indeterminate depth below. The wells are usually driven through hard-pan and the ground waters from this lower gravel bed is a source of supply. There are 65 cess-pools and many privies in the borough, none of them being sunk to or below the clay stratum.

An analysis of 9 cases, the total number reported during the year 1911, includes 2 residents of Jackson Township, members of the same family, and 1 resident of Bloomsburg, and gave the information tabulated as follows:—

AGE AND SEX.

Age.	Male.	Female.	Total.
15 to 19,	0	2	2
20 to 24,	0	0	0
25 to 29,	0	0	0
30 to 34,	1	0	1
35 to 39,	1	0	1
40 to 44,	1	0	1
Total,	5	4	9

Milk supply follows:

MILK.

Ash,	2
McHenry,	1
McBride,	1
Various,	1
Own cow,	4
	<hr/> 9

There was no other source of possible infection to these patients other than is noted in the following tabulation:—

Case No.	Onsets.	Driven well	Edson's Spring.	Laubach's Well.	Negro Camp Meeting, Zaner's.	Grangers' Picnic, Zaner's.	Grassmere.	Orangeville.
No. 1,	7-30	+	+	+	+	+	—	—
No. 2,	8-10	+	—	—	—	—	7-4-11	—
No. 3,	8-24	+	—	—	—	—	—	—
No. 4,	9-7	+	—	—	—	—	—	+
No. 5,	9-21	—	—	—	—	—	9-7-11	—
No. 6,	9-21	+	—	—	—	+	9-7-11	—
*No. 7,	9-24	Dug well	—	—	—	—	9-7-11	—
†No. 8,	9-24	Dug well	—	—	—	—	9-7-11	—
No. 9,	9-29	Driven well	—	—	—	—	9-7-11	—

*Bloomsburg.

†Jackson Township.

Case No. 1. A traveling man, drives through a large section of the county in this vicinity and had obtained water from many sources, including Zaner's, within three weeks prior to his illness.

Case No. 2. Obtained water from both Zaner's and Grassmere within 30 days prior to the onset of his illness.

In Case No. 3 the source of infection could not be clearly obtained though there was an indefinite history of having visited Zaner's and Grassmere.

Case No. 4 (the father of Case No. 3) was unquestionably a secondary infection from contact with Case No. 3.

Nos. 5, 6, 7, 8, and 9 all obtained water supply from Grassmere on September 7th and No. 6, in addition having used water within 30 days at Zaner's.

Grassmere, Sugar Loaf Township, is a small wooded section surrounded by a farming community which is used extensively as picnic grounds. A farmers' picnic of that vicinity was held in this park on September 7th, 1911. The water obtained there is a spring supply but is subject to pollution from nearby fields and by the rise in the waters of a small stream which in turn received the drainage from several barnyards. No cases of typhoid fever could be traced to the pollution of this stream.

Zaner's is a smaller rural park located in Fishing Creek Township on the banks of Fishing Creek. The water supply is from both shallow dug well and spring. These are both subject to surface pollutions.

A careful analysis of all conditions led to the conclusion that the water supply at both Grassmere and Zaner's is subject to occasional but temporary pollutions and the history of precipitation obtained from local records would indicate that there was a probability of such pollutions occurring frequently during the months of July, August and September from heavy thunder storms. No official records are kept in this community, hence could not be obtained.

A meeting of the Board of Health was held in the office of the President; circular Form No. 2 was supplied for distribution; the questionable diagnosis of two cases was reviewed by the request of the attending physician and specimens of blood collected gave a positive agglutination reaction. The general sanitary conditions of the town with reference to the proximity of points of sewage disposal to sources of water supply were discussed and a prognosis to the effect that no other cases, except secondary cases, would occur was given to the President of the Board. This opinion has been subsequently justified by the fact that no other cases have been reported from this borough or vicinity.

REPORT OF AN OUTBREAK OF TYPHOID FEVER IN MONTGOMERY BOROUGH, LYCOMING COUNTY, OCTOBER, 1911. .

In accordance with your instructions telephoned from Austin, Potter County, I proceeded to Montgomery Borough, Lycoming County, on October 9th, 1911, in order to investigate the prevalence of typhoid fever. The request for assistance had been received on October 8th from the Burgess, D. W. Shellenberger, and the President of the Board of Health, M. Yarrison. .

I was accompanied in this investigation by Assistant Engineer W. H. Ennis and Special Officer I. M. Ziegler. A report on the water supply and sewage disposal is included in the report of the Engineering Division.

The borough of Montgomery is a manufacturing and residential community, organized in 1877, and is located on the west branch of the Susquehanna River in Lycoming County about 15 miles down stream from the city of Williamsport. The population, according to the census records, is as follows:—

1890,	1,278
1900,	1,665
1910,	1,904

The increase in population has been slight but constant and is due to the permanent employment in the various industrial plants. The principal industries are the American Wood Working Machine Co., The Montgomery Door and Sash Co., the Penn Manufacturing Co., the Deutchle Planing Mill and several smaller works, all of which employ about 500 men and women.

The municipal territory is irregular in outline and extends to about a mile north of the river, though the main thoroughfares are parallel to the river and the Pennsylvania and Philadelphia and Reading Railroads.

Black Hole Creek, a stream having its source in the Bald Eagle Mountains about four miles north, flows through the center of the borough between two somewhat precipitous hills and finally empties its waters into the Susquehanna River about one-quarter of a mile below the borough limits. The principal business street parallels to the direction of Black Hole Creek while Montgomery Street, the principal general thoroughfare, is practically at right angles. The residential sections are, for the most part, on the hills and on the northern end of Main Street between the latter and Black Hole Creek. All the manufacturing plants are along the railroads.

There are two private water works in the borough which supply water to over 50 per cent. of the inhabitants. In addition, water is obtained for a portion of the population from 100 dug and drilled wells and a few private springs.

The Montgomery Water Company was chartered in 1897 for the purpose of supplying water to the public in Montgomery Borough and adjacent townships. The works were built the same year and the water supply was obtained from Black Hole Creek until 1905 when an additional supply was obtained from drilled wells. The water works system comprises a filter crib, pumping station with the usual force and distributing system and a small temporary storage reservoir. The Black Hole Creek supply is obtained within the borough about 500 feet below the northern borough line and below the natural

drainage from the residential portion of the town on North Main Street. A wooden dam about thirty feet long and six inches high furnishes a temporary storage supply in times of drought.

The water shed of the creek above the intake has an area of only 18 square miles on which there are 198 properties and a population of approximately 900, which includes 90 inhabitants within the borough limits. Farming and one stock farm devoted to the raising of pigs are the only sources of direct pollution on the stream. No cases of typhoid fever were discovered nor have been reported from premises on the water shed since January, 1911 and there is no evidence that this patient polluted the stream. The case was reported from Armstrong Township.

The drilled wells, two in number, are flowing wells located opposite the creek intake about 400 feet from the west bank. They are drilled through shale and slate rock to a depth of 208 and 230 feet respectively and are cased to a point 16 feet below the surface into the slate rock. The combined flow is estimated to be about 45,000 gallons per 24 hours, or about three-fifths of the daily supply.

Sewage is disposed of, in part, by two short public sewer lines and a number of private sewers, all of which discharge into the Black Hole Creek at various points below the intake of the Water Company's supply. In addition there are about 75 cesspools and upwards of 150 privy vaults in use.

There have been but few cases of typhoid fever reported in this borough prior to the present year and the record of all cases reported in the borough and in the adjoining townships of Clinton and Brady are presented in order to show the morbidity since January 1909.

MONTGOMERY BOROUGH.

	1909.	1910.	1911.
January,	0	0	0
February,	0	0	0
March,	0	0	6
April,	0	0	2
May,	0	0	0
June,	0	0	1
July,	0	0	0
August,	0	1	0

CLINTON TOWNSHIP.

	1909.	1910.	1911.
January,	0	0	0
February,	0	0	0
March,	0	0	0
April,	0	0	0
May,	0	0	0
June,	0	0	0
July,	0	0	0
August,	1	1	0

BRADY TOWNSHIP.

	1909.	1910.	1911.
January,	0	0	0
February,	0	0	0
March,	0	0	0
April,	0	0	0
May,	0	0	0
June,	0	0	0
July,	0	0	1
August,	0	0	0

The large increase in the number of cases caused the members of the local Board of Health to make the request for assistance to you. The morbidity beginning with September 1st is detailed in weeks to the end of the year in order to show the prevalent character of the present outbreak.

MONTGOMERY BOROUGH.

September, 1911:	
1st week,	0
2nd week,	1
3rd week,	2
4th week,	3
October, 1911:	
1st week,	12
2nd week,	2
3rd week,	2
4th week,	2
November, 1911:	
1st week,	1
3rd week,	2
4th week,	4
December, 1911:	
4th week,	1

Immediately after arrival I attended a meeting of the Board of Health. All members were present and by invitation the Borough Burgess and members of the Borough Council were present. The Board of Health consisted of the following:—

President, M. Yarrison; Secretary, H. J. Burley; L. V. Waltman, J. W. Piatt, J. Frank Hall; Health Officer, W. M. Sechler.

As all except the Health Officer were members of the Board it was arranged that Mr. Burley should resign as Secretary but maintain his membership on the Board. This was carried out at once and Mr. H. I. Breon was elected as the new Secretary.

The census of all cases which was made at once determined the source of the infection to be polluted water from the public supply and the additional possibility of certain wells causing a smaller proportion of infection. The tabulation of the 27 cases reported during 1911 is as follows:—

ONSET.

March 22,	1	Sept. 20,	2
March 31,	1	Sept. 23,	1
June 9,	1	Sept. 26,	2
June 23,	1	Sept. 27,	3
August 1,	1	Sept. 28,	4
August 2,	1	Sept. 29,	2
August 27,	2	Sept. 30,	1
August 28,	1	Oct. 1,	1
Sept. 10,	1		
Sept. 12,	1		

Total house population, 126.

2 houses have 2 cases.

25 houses have one case.

AGE.

1 to 4,	1	35 to 39,	4
5 to 9,	1	40 to 44,	5
10 to 14,	3	45 to 49,	2
15 to 19,	3	50 and up,	3
20 to 24,	5		
25 to 29,	1		27
30 to 34, .....	...	
Males,	17	Females,	10

WATER SUPPLY.

Public and spring,	2	Public only,	13
Dug well and spring,	2	Public and various,	1
Public and dug well,	9		27

ICE.

Nuss (artificial),	10		
No ice used,	17		27

MILK SUPPLY.

C. E. Metzger,	5	C. E. Dunn,	4
Clinton Thomas,	2	Own supply,	4
Edw. Dicker,	8		
Edw. Fretz,	4		27

SEWAGE DISPOSAL.

Public sewer,	10	Cesspool,	1
Privies,	2	Surface,	9
Buried,	15	Sump,	1
K. W. W. W.,		Old well,	1
Sewer,	11	Garden,	1
Creek,	3		

MORTALITY.

There were no deaths.

It is apparent that the infection in these cases was due entirely to sewage contamination of the water supply. Of the two cases who secured water from dug well and spring only, both were evidently infected from the dug wells referred to since the analyses of the water showed both wells to be highly polluted with sewage organisms. In addition, eight dug wells and one drilled well in the borough show the presence of bacillus coli, all being wells on the lower levels of the village and in more or less direct relation with the creek and sources of sewage disposal. The water analyses follow—

SPECIMENS COLLECTED APRIL 17TH.

	Bacteria per c. c.	B. Coli per c. c.
Raw water, Black Hole Creek,	120	0
Tap, pump station,	48	0
Pump well,	40	1
Taps:		
J. R. H.,	420	0
H. B.,	280	0
W. M. K.,	24	0
H. F. K.,	8	0
C. M.,	36	0
Hotel Montgomery, drilled well,	16	0

SPECIMENS COLLECTED OCT. 9TH.

	Bacteria per c. c.	B. Coli per c. c.
Raw water, Black Hole Creek,	100	21
Tap, pump station,	2	0
Pump well,	160	6
Taps:		
25 Brock St.,	24	0
Levi Houston Machine Shop,	10	0
Dead end, East Wayne Ave.,	12	0
Reservoir inlet,	20	0

SPECIMENS COLLECTED OCTOBER 10TH.

	Bacteria per c. c.	B. Coli per c. c.
Raw water, Black Hole Creek,	20	4
Raw water, Black Hole Creek,	60	6
Raw water, Black Hole Creek,	30	8
Tap pump station, mixed,	20	4
Tap pump station, mixed,	3,500,000	140
Tap drilled well only,	24	1
Pump well,	100	4
Taps:		
Dead end, N. Main St.,	60	1
P. & R. R. Station,	210	0
Dead end, Wagner Station,	12	0
P. & R. R. Station,	12	0
Dead end, E. Broad St.,	60	4
Dead end, J. R. S.,	24	0

SPECIMENS COLLECTED OCTOBER 9 AND 10, FROM WELLS AND SPRINGS.

	Bacteria per c. c.	B. Coli per c. c.
F. C. K. well,	240	12
Decker's well, drilled,	60	2
Dug well, A. G. D., Main and Broad,	6	0
Drilled well, Montgomery Table Co.,	14	0
Well on L. property, Main St.,	60	10
Dug well, I. D. property, W. Brook,	40	10
Dug well, C. D., N. Main St.,	20	1
Dug well, Houston St.,	80	1
Drilled well, Penn Furniture Co.,	6	0
*Well, W. M., 1st St.,	80	1
†Well, J. J., Main and Broad Sts.,	10	1
Well, Decker property, 2nd and Broad,	16	1
Drilled well, Montgomery Hotel,	3	0
W. E. F., drilled well,	6	0
O. B., dug well, Duke St.,	2	0
E. E. B., N. Main St., dug well,	120	12
Dug well, O. H. H., N. Main St.,	10	0
Dug well, R. H.,	40	4
Dug well, G. McW.,	110	0
Dug well, D. W. S.,	1	0
Tap spring supply, Dr. G.,	10	0
Jno. H. Springs, Clintonville,	10	0
Spring, Dr. A. P. H., Bower and Houston Sts.,	3	0

*Case No. 2 used this water.

†Case No. 3 used this water.

The conclusions derived from the study of the tabulation of cases are as follows:—that 25 or 92 per cent. used the Montgomery Water Company's supply; that 40 per cent. of the cases used this Company's supply only; that 29 per cent. of the cases at times used water from wells located near the banks of Black Hole Creek; that 4 per cent. of the cases were under 5 years of age, which taken in connection

with the varied sources of milk supply would seem to exclude milk or ice cream as the medium of infection; that there was no localization of the cases but rather a general distribution.

It will be observed from these conclusions and the above tables that water was the medium of transmission of the infection and that while certain cases are traceable to ground water supplies it is probable that the portion of the Montgomery Water Company's supplies from Black Hole Creek was the more important medium of transmission; as there were no secondary cases the distribution over a considerable period of time and the absence of an explosive character to the outbreak, as is usual in water transmission, is counteracted by the fact that three-fifths of the Montgomery Water Company's supply, as distributed, consists of a potable water from deeply drilled and properly protected wells. This fact is still further borne out in the rapid changes in the amount of water found in the stream supply following a rainfall. The records of the observer of the United States Weather Bureau at Williamsport would indicate that the precipitation in this region would account for the intermittent and transitory changes of the waters in Black Hole Creek.

The ice supply for the borough is obtained from a dam on a small mountain stream located in Clinton township. The water shed above the source of ice supply is occupied by farms and receives the surface drainage from at least five of them. However, there was no evidence that ice was in any way the source of infection.

The five principal dairies supplying milk to the borough were found to have an average sanitation in fairly well-to-do rural communities and there was no evidence that any one connected with the production or vending of the milk had suffered with gastro-intestinal disease during the past ten years.

Because of the suspicious character of the Black Hole Creek water and the various ground water supplies, the local Board of Health had already notified the public to boil all water used for domestic purposes. The public had likewise been notified to boil all milk. A sanitary investigation made by the local Health Officer had already been initiated before the arrival of your representatives; it had resulted in the removal of all wastes and general and thorough liming wherever a nuisance had existed. It was recommended to them that precautions already adopted should be continued.

Under the direction of Mr. Ennis and Mr. Ziegler an apparatus for the chemical treatment of the water supply with hypochlorite of lime was installed at the pumping station. The water in the reservoir was disinfected with copper sulphate immediately and later the reservoir was drained and thoroughly cleaned. All the fire hydrants of the piping system were drained and the mains were thoroughly flushed with the treated water for several hours.

By request of the local authorities I met with the Burgess, the Borough Council and the Board of Health on the evening of October 10th and discussed with them the conditions in relation to the outbreak of typhoid fever and the general subject of municipal sanitation. The following placard was drawn up the same evening and given wide distribution throughout the borough :

WARNING.

Following the recent fever epidemic, we wish to warn the public against using town water or from wells without first boiling as there has been no permanent correction of the water conditions in this borough and there continues the same danger until better arrangements are made.

All milk should be boiled before using as heretofore.

Keep your closets and premises in a cleanly and sanitary condition.

Board of Health of Montgomery Borough.

An inspection of the water shed of Black Hole Creek above the Water Company's intake had been made earlier in the year, the reports of which show that up to July 1st, there were 45 pollutions on 17 properties. Notices of abatement were served on all these properties and on November 3rd but 7 pollutions still exist.

INVESTIGATION OF DIPHTHERIA, STEELTON BOROUGH,
DAUPHIN CO., OCTOBER 18, 1911.

By your instructions given on October 18th, 1911, I investigated the reasons for the unusual prevalence of diphtheria in Steelton borough, Dauphin County.

On my arrival I consulted with Dr. W. J. Middleton, President, and Dr. J. Markward Peters, Secretary of the Board of Health; Professor L. E. McGinnis of the Public Schools, and Eber Butler, Health Officer.

Steelton has a population of 12,246. Seventeen cases of diphtheria had been reported during August, twenty-eight cases during September, and thirty-three cases during the eighteen days of October. The thirty-three cases under quarantine at the present time have been reported between the dates of October third and eighteenth, the onsets being as follows:—

October 3,	1	October 14,	2
October 4,	6	October 15,	3
October 5,	2	October 16,	2
October 7,	1	October 17,	5
October 10,	2	October 18,	6
October 12,	3		

The last case prior to this series gives the date of onset as being September 26th. A tabulation of the ages and occupations gives the following results:

AGES.		OCCUPATIONS.	
0 to 4,	9	Pupils,	17
5 to 9,	11	Cigar factory,	1
10 to 14,	7	House-keeper,	1
15 to 19,	2	Engineers,	1
20 to 24,	1	No occupation,	13
46,	1		
Unstated,	2		
	33		33

And are distributed in twenty-six houses in the five wards of the borough as follows:

First Ward,	5 cases	Fourth Ward,	1 case
Second Ward,	12 cases	Fifth Ward,	6 cases
Third Ward,	9 cases		
			33

The second and third wards are populated by the average middle-class protestant Americans. During September there were practically no cases reported from these wards, the major number of the twenty-eight cases occurring in the fifth ward which is populated for the most part by a foreign element, somewhat resistant but eventually obedient to quarantine regulations.

Reliable information indicates that two factors are largely responsible for the spread of the disease. First, certain physicians have erred in opposing the length of quarantine period and to some extent in diagnosis. Second, parents residing in the second and third wards have not called for the services of a physician but have preferred to use proprietary remedies, at times ignorantly, at other times apparently with full knowledge of what they were doing, while brothers and sisters of the patients were in the meantime attending the public schools.

There are 1,855 children enrolled in the public schools and 478 children enrolled in the parochial schools. In the public schools the pupils have, for the major part, individual seats; the coat rooms are arranged to allow the minimal contact of garments; the fountain method of water supply is in universal use, no cups being permitted; pencils and books are collected and re-distributed; especially in the primary grades.

This borough covers an area of approximately $2\frac{1}{2}$ square miles, the greatest amount of infection being in the most congested wards. The school system does not depend on ward divisions but on individual assignments.

The members of the Board of Health were particularly glad to have the State Department of Health act in an advisory capacity, while the school authorities expressed their readiness to close schools for any period of time recommended.

Because of the rapidly increasing number of cases reported and conditions recited above, under your authority, I advised the Board of Health to recommend the closing of schools for a period of ten days and that for a like period all other schools and places of public gathering should also be closed; further, that announcement should be made through the public press or by other measures, warning physicians, teachers and especially parents, of their responsibility in reporting the presence of diphtheria on any premises, quoting Section 24 of the Act of Assembly of May 14, 1909; that the physician on the Board of Health be advised to make investigation of and visit all unreported cases in order to establish the diagnosis and should supervise the conditions in families which had already been released from quarantine.

It had been the opinion of the local Board of Health to make a culture from the throat of every school child, but acting on my suggestion they decided to close all schools and places of public gathering and at the end of each quarantine period to make cultures from the throats of all contacts before releasing from quarantine and performing disinfection.

INVESTIGATION OF POLIO MYELITIS IN HARRISBURG, DAUPHIN CO., OCTOBER 19, 1911.

By telephone arrangement with Doctor John A. Scherger, 1809 North Sixth St., Harrisburg, Pa., I visited the premises of Arthur J. Myers, 2316 Jefferson St., Harrisburg, Pa., on October 19, 1911, in order to establish a diagnosis in the case of his daughter Catherine.

The history of the child is as follows: The birth was instrumental but without injury. At the sixth month it was necessary to use a diet of artificial food. There was no serious difficulty in development. The child has been fortunate in having escaped all of the communicable diseases and has not suffered any long continued illness.

On Monday, October 16, 1911, the mother observed that the child had some fever and complained of pain in the occipital and frontal region at bed time; she was very nervous and cried out in her sleep; she had complained somewhat of pain in the calf muscles of the right

leg before being put to bed. On the evening of October 17th the pain had extended to all four extremities. The tongue was badly coated and there was obstinate constipation. At this time there was observed considerable weakness of the lower extremities, especially of the knees. No tenderness was noted by the parents at this time. Doctor Scherger was called in on the evening of the same day and found a temperature of 100.4 F. and a pulse approximating 100; he noticed some weakness of the lower right extremity with a diminution of the patellar reflex on the same side. On the next day the temperature was 100.6 F. with well developed paralysis of the right lower extremity.

The examination on October 19th was as follows: The child showed good development in relation to her age. She responds to questions promptly and accurately, no defects of the special senses being observed, temperature was normal, there was a moderate degree of tenderness throughout the right lower extremity, an absolute loss of the patellar reflexes and a flacid motor paralysis of all of the muscles of flexion and extension. Abduction, adduction and rotation are in part preserved. There was some tenderness over the spine from the cervical region to the coccyx. The examination otherwise was negative.

Diagnosis—Acute Anterior Polio-Myelitis.

The patient was the playmate of Mary Catherine Rothfuss, 2245 Jefferson St., Harrisburg, Pa. The latter was five years and eleven months of age and died on September 21, 1911, a diagnosis of the cause of death being given by Doctor F. D. Kilgore, 2011 North Sixth St., Harrisburg, as acute "bronchial pneumonia." She and Catherine Myers had been constant playmates, being in contact with each other up to and including September 19th. The history of Mary Catherine Rothfuss shows that she was taken ill some two or three days prior to death and was probably ill on September 19th, the last day of contact with Catherine Myers. A diagnosis of acute polio-myelitis was made based on the fact that the child had total paralysis, the neck muscles being especially involved. She recovered so far as to be able to go to the physician's office for electrical treatment but died suddenly on September 21st, with what appeared to be acute pulmonary oedema of the lungs. There is no record that this case was reported by the attending physician. The features indicate that the child suffered the ascending spinal type of acute anterior polio-myelitis.

REPORT OF AN INVESTIGATION INTO THE PREVALENCE OF TYPHOID FEVER IN TARENTUM, ALLEGHENY COUNTY, OCTOBER AND NOVEMBER, 1911.

In accordance with your instructions I proceeded to Tarentum, Allegheny County, on October 11th, 1911 in order to investigate the reasons for the unusual prevalence of typhoid fever. I was accompanied by Engineer R. E. Irwin and Sanitary Inspectors J. D. Marshall, W. W. Reno, Charles W. Collins and Charles H. Spelker.

Tarentum is a manufacturing borough, located on the west bank of the Allegheny River, 21 miles north of Pittsburgh. It is bounded on the north by the borough of Brackenridge and on the west and south by East Deer Township. Above Brackenridge in the first class township of Harrison, is Natrona, and south of Tarentum, along the Allegheny River, are the villages of Creighton, Hites and Glassmere.

Bull Creek, having its sources in the northern part of Allegheny County and in Beaver County, flows through a deep cut in the ridge on which Tarentum is located and empties into the Allegheny River just below the central portion of the borough.

The borough is long and narrow with a somewhat abrupt slope toward the River.

The public water supply is furnished by the Allegheny Valley Water Company, through its subsidiary, The Tarentum Water Company. In addition to the borough, water is furnished to the borough of Brackenridge, to all villages in East Deer and to that portion of the village of Natrona south of Pond Street. The pumping station is located opposite Brackenridge on the banks of the Allegheny River, from which the supply is taken. Sewers from Natrona and a number of industrial plants in Harrison Township discharge their contents into the River within a mile and above the water intake. The supply is obtained by means of a crib. A mechanical filter plant was completed in 1908, following a decree issued by you in 1907.

The Allegheny Valley Water Company furnishes the supply to upwards of 12,000 persons. The population of the district is as follows:—

Tarentum borough,	7,414
Brackenridge borough,	3,134
East Deer Township,	3,702
Harrison Township,	6,687

In addition, there are nearly 200 dug wells said to be in use at the present time. Many of these are located on the flat regions of the borough contiguous to the River.

The sewerage system of Tarentum is built on the combined plan, under municipal control, and discharges into the Allegheny River at points opposite the borough. Much of the kitchen wastes is discharged into the gutters. Four private sewers, many individual pollutions and privies, either over the stream or on its banks, have converted Bull Creek into an open sewer.

The records of previous typhoid fever in the entire district included 578 cases reported from the date of organization of the State Department of Health in 1905 to the issuance of the decree in 1907; of these 290 were in the borough of Tarentum. The total mortality of the 578 cases was 31 or 0.5 per cent. This low mortality in conjunction with the distinct history of endemic bacillary dysentery and the known facts as to water supply and distribution indicated that the water was the means of transmission.

The disease continued to be prevalent, though in a markedly less degree up to the time of full operation of the new filtration system in 1908, when a marked reduction occurred. The records of Tarentum borough for 1909 and 1910 served as an index and confirmed the opinion that the water was the avenue.

	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.
1909,	0	0	1	0	1	1	2	3	2	2	0	2
1910,	0	0	0	1	1	2	0	0	1	4	2	0
1911,	1	3	6	0	2	0	0	0	9	23	....	....

However, there occurred an increase from July on during each year except 1911, when the increase began in August and was sharply augmented in September. This yearly increase and the reports of 32 cases in Tarentum borough alone during 60 days made an investigation necessary.

Our investigations included a study of the water system, and milk supplies in particular, and the other possible factors in general. 56 cases with dates of onsets between July 15th and October 12th inclusive form the basis of an opinion as to the means of transmission.

These cases were located within the zone of the Allegheny Valley Water Company, distribution as follows:—

Tarentum,	33	Natrona,	1
Brackenridge,	13	Etna,	1
Creighton,	4		
Hites,	1		
Glassmere,	2		
			55

One case ill at Parnassus, R. F. D., was shown to have become infected at Tarentum.

It is evident from an analysis of the age and sex that no particular place or kind of employment was a factor.

AGE AND SEX.

	Male.	Female.	Total.
0—4,	1	3	4
5—9,	4	2	6
10—14,	1	6	7
15—19,	5	7	12
20—24,	1	2	3
25—29,	7	5	12
30—34,	1	1	2
35—39,	3	0	3
40—44,	1	0	1
45—50,	1	1	2
Unstated, .....	....	....	2
	25	29	56

It should be noted, however, that 34 or 61 per cent. were between 10 and 30 years of age, indicating that milk or ice cream was less a factor than water.

An investigation of the use of milk shows that 40 of the patients obtained their supplies from 12 different dealers, while 16 either did not use milk or cream or used it so unfrequently that it could not have been a factor. Of the twelve dealers one furnished 10 patients and one furnished 14 patients. The former dealer supplied 35 families while the latter supplied 300 families. The 8 principal dealers, with 36 cases on their routes, furnished 547 families. No cases of gastro-intestinal disease could be found on the sources of milk and cream supply.

The proportion of cases having used other food stuffs which could transmit the infection was so small that such avenues were readily excluded from consideration.

The season of the year and the recorded meteorologic changes excluded flies as a factor.

With reference to water supplies, the following usage is noted:

Tarentum Water Company only,	21
Tarentum Water Company and other,	19
Unstated,	3
Spring only (1?),	3
Spring and pot house well,	1
Pot house well only,	1
Hunter well only,	1
Drilled well,	1
Dug well only,	6

Of these 40 used the public water either alone or with other water. The information as to 16 is somewhat uncertain because of foreign birth and their inability to understand.

The analysis of certain waters from the borough of Tarentum made for the Board of Health on August 30th gave the following results:—

TOTAL BAC. B. C. PER C. C.

* (1) Well, 30 foot well, 3rd ward parochial school,	650	+
* (2) 1st ward school, city water,	850	+
* (3) 2nd ward school, 75 foot well,	21	—
* (4) High school, 100 foot well,	350	—
* (5) 3rd ward school, 85 foot well,	22	—
* (6) Paper mill, well 200 foot,	26	—
* (7) Gephart property, 30 foot well,	620	—
* (8) Stewart well, 199 Ross St.,	35	—
* (9) Pot house well,	60	—
* (10) R. R. well, open, 30 foot dug well, level of river well,	1,350	+
* (11) Baker well, dug 40 ft. bottom 15 ft. below river,	720	—
* (12) Reinche well, dug 30 ft., 127 1st Ave.,	3,200	—

At this time the Board did not have knowledge of direct pumpage from Bull Creek and the Allegheny River, to be noted later. The analysis of the principal well waters in use is of value in excluding it from consideration as the principal (or as any) factor in the prevalence of typhoid fever.

Analyses made in the Department Laboratory gave negative results. These specimens were collected subsequent to correction of pumpage of raw water. The last date of connection at the most probable focus was August 7th.

The Tarentum Water Company began repairs to the pump station and installment of new boilers on July 12th and were out of service for 4 hours. During this period water was pumped into the public supply mains by the Pittsburgh Plate Glass Company, with whose 6-inch mains a connection is maintained at two points—at No. 1 plant at Creighton, (the connection being at Fort Ave.) and at Alley No. 1, Tarentum. The record of pumpage through these connections is as follows:—

At Creighton	
May 20 to 22,	27 hours
June 22,	24 hours
July 26,	20 hours
Aug. 12, 13, 14 and 15,	48 hours (12 each)
At Alley No. 1:	
June,	30 hours
July,	282 hours
Aug. 1 and 2,	11 hours
Aug. 3,	12 hours
Aug. 5-7,	38 hours

The Pittsburgh Plate Glass Company obtains its industrial supply by direct pumpage from the Allegheny River and Bull Creek and its drinking supply from dug wells. The supply from Bull Creek was pumped at the rate of 3,000,000 gallons per day.

It is reasonable to believe that the pumpage from Creighton was not a factor in this outbreak. The pumpage from the polluted waters of Bull Creek through connections at Alley No. 1 was the probable cause of the increased typhoid morbidity. This was carried out during a total period of 61 hours from August 1st to 9th. There is a distinct history of the widespread prevalence of bacillary dysentery during that same week. The first case of typhoid fever was actually reported to the local Board of Health on August 20th, i. e. within the incubation period dating from August 8th. The maximum of cases were probably infected during this period as the dates of onsets between September 1st and September 17th indicate. The onsets by weeks is as follows:—

ONSETS.

July,	2 cases
August:	
1st week,	7 cases
2nd week,	0 cases
3rd week,	1 case
4th week,	2 cases
September:	
1st week,	8 cases
2nd week,	3 cases
3rd week,	12 cases
4th week,	9 cases
October:	
1st week,	5 cases
2nd week,	1 case
Indeterminate,	6 cases
Total,	56 cases

Fortunately, the local Board of Health issued a warning to boil the water on August 20th after receipt of the first report. It is believed that 0.9 per cent. of the population observed this advice and it was probably the greatest factor in preventing subsequent cases.

Engineer Irwin made a careful survey of the methods of supply and distribution of the water and established a temporary hypochlorite of lime treatment plant.

Your representative met with the members of the Board of Health, confirmed their ideas as to the sources of infection, informed them of the action taken and advised the usual measures relative to prevention of secondary cases.

INVESTIGATION OF DIPHTHERIA, CITY OF LANCASTER, NOVEMBER 23, 1911.

By your direction I proceeded to Lancaster in response to the request of Dr. C. P. Stahr, Medical Inspector of the Board of Health, on Thursday, November 23rd to investigate the unusual prevalence of diphtheria.

Reported cases show that that disease is endemic in Lancaster; however, but one case was reported for the month of July 1911; nine cases were reported for the month of August, four cases for the month of September, twenty-seven cases for the month of October, and thirty-three during the first twenty-three days of November. An analysis of the sixty-four cases reported during September and October and the portion of November shows the following:—

AGE.

0 to 4 years,	16	25 to 29 years,	1
5 to 9 years,	29	30 to 34 years,	2
10 to 14 years,	10	Unstated,	1
15 to 19 years,	4		
20 to 24 years,	1	Total,	64

SEX

Male,	32	
Female,	32	64

DATES OF ONSETS.

September 2,	1	November 1,	4
September 11,	1	November 2,	1
September 25,	1	November 3,	2
September 27,	1	November 7,	1
October 2,	1	November 9,	2
October 5,	1	November 10,	2
October 8,	1	November 11,	3
October 10,	1	November 12,	2
October 12,	2	November 13,	4
October 14,	5	November 14,	1
October 16,	1	November 15,	2
October 19,	2	November 16,	2
October 22,	2	November 17,	1
October 23,	1	November 18,	1
October 24,	1	November 19,	2
October 26,	2	November 20,	2
October 27,	2	November 21,	1
October 28,	1	Unstated,	1
October 29,	2		
October 30,	1		64

Occupation.

Patient.		Householder.	
None,	25	Housework,	2
School,	31	Carpenter,	2
Housework,	1	Teamster,	4
Mortorman,	1	Laborer,	14
Housewife,	1	Tobacco packer,	2
Cigar-maker,	2	Linoleum factory,	1
Baker,	1	Upholsterer,	1
Weaver (silk),	1	Fool parlor,	1
Nurse,	1	Umbrella factory,	1
		Grocer,	1
Total,	64	Tailor,	1
		Policeman,	2
		Varnish agent,	1
		Bricklayer,	1
		Machinist,	3
		Bill poster,	1
		Furniture store,	1
		Motorman,	2
		Waiter,	1
		Conductor,	1
		Peddler,	1
		Agent,	1
		Baggageman,	2
		Bank clerk,	3
		Stableman,	1
		Locksmith,	1
		Watch maker,	1
		Pressman,	3
		Butcher,	1
		Ticket agent,	1
		Mason,	1
		Blacksmith,	1
		Clerk,	1
		Unstated,	2

Distribution in Relation to Sunday Schools.

	Sept.	Oct.	Nov.
Eman. Lutheran,	1	1	..
St. Luke Reformed,	3	1
First Reformed,	1	..
United Brethren (Orange St.)	2	..
St. Joseph Catholic,	6	3
Zion Lutheran,	1	..
St. Anthony,	1	..
Grace Lutheran,	1	..
St. Joseph's Episcopal,	1	..
St. Mary's Catholic,	1	..
German Reformed,	1	..
Evangelical Lutheran (Locust St.),	1	..
Pearl Street M. E.,	1	1
St. Paul's Reformed,	1	..
Memorial Presbyterian,	1	..
Sacred Heart,	1	2
Christ Lutheran (W. King St.),	3
St. Paul's M. E.,	1
St. Mark's Lutheran,	1
Trinity Lutheran,	2
First Presbyterian,	1
St. James' Episcopal,	1
Advent Lutheran,	1
Faith Reformed,	2

Distribution in Relation to Physicians.

H. B. Snavely,	2	J. Shannon,	1
J. A. Capp,	3	W. K. Baer,	6
H. F. Myera,	12	J. K. Shirk,	2
F. G. Hartman,	1	J. L. Mowery,	1
H. R. Bryson,	2	J. M. Shartle,	1
M. L. Davis,	1	H. C. Kinzer,	1

Distribution in Relation to Physicians—Continued.

G. M. Hoover,	1	E. R. McCormick,	1
W. H. Herr,	1	W. D. Blankenship,	3
M. L. Chadman,	1	G. W. Reith,	1
H. C. Barsumian,	2	Harry Pomecrantz,	1
N. E. Bitzer,	1	George King,	1
C. E. Netscher,	2	S. M. Lingenfeldter,	1
E. S. Snyder,	5	H. M. Sultzbach,	2
T. B. Apple,	3	S. W. Miller,	1
P. P. Brenneman,	2	Mary Bowman,	1
J. W. Kinard,	1		
Total,		64 Cases.	
Physicians,		31	

Distribution in Relation to Wards.

(As reported)

	Sept.	Oct.	Nov.	Total.
First, .....	..	..	..	..
Second, .....	..	2	2	4
Third, .....	..	4	2	6
Fourth, .....	..	..	3	3
Fifth, .....	..	..	3	3
Sixth, .....	..	1	2	3
Seventh, .....	..	2	3	5
Eighth,	1	15	17	33
Ninth,	1	..	2	3
	2	26	32	60

Distribution in Relation to School Buildings.

Public

	Sept.	Oct.	Nov.	
Manor,	2	2	1	
South Duke, .....	..	3	1	
Pearl, .....	..	1	..	
W. Chestnut, .....	..	1	..	
N. Mary, .....	..	1	..	
Fremont, .....	..	..	5	
Lemon, .....	..	..	2	
Mulberry, .....	..	..	2	
	2	8	11	-21

Parochial.

St. Joseph,	3	4	
Sacred Heart, .....	..	3	
	3	7	-10

Distribution in Relation to Homes.

47 Houses 1 case each.
 4 Houses 3 cases each.
 4 Houses 2 cases each.

Home Contacts.

There were 100 contacts in homes, of which 83 were school children; 15 had no occupation, and 2 were unstated.

It is to be observed, as indicated by dates of onset, there were none of the features of the usual type of outbreak or epidemic but that there was a fairly even distribution of the cases through the months of October and November; this is again noted in the distribution in relation to public and Sunday schools. About 49 per cent or 31 of the cases were school children and were in contact with 83 school children who did not develop the disease. The distribution of the

31 cases in 7 public and 2 parochial schools gave no suggestion as to the source of infection, at least through that channel. Dr. Stahr, the Medical Inspector for the Board of Health, holds a similar position under the school authorities. The Manor, South Duke, Fremont, St. Joseph and Sacred Heart buildings were closed by his direction at various times following the presence of reported cases from those schools for periods of forty-eight hours, during which the buildings were disinfected. Sanitary measures are not carefully carried out, school contacts are not placed under observation and are not excluded. Individual cups are in common use. Sponges and slates are in use in practically all grades. There is very close contact of the outer clothing in the cloak rooms. However, books and pencils are not collected and re-distributed, as each child has his or her own and keeps them in his or her own desk.

It had been suggested and was the belief of several members of the Board of Health that the major number of cases were under the care of one physician. This opinion probably gained credence through the fact that one certain physician who is practicing in the eighth ward has refused to comply with a resolution of the local Board of Health with reference to the bacteriological examination of suspicious cases of sore throat. A study of the cases indicated that they had been reported by thirty-one physicians.

It was found that thirty-three, or somewhat over 50 per cent. of the cases had been reported from the eighth ward. This is a Catholic community and the major number of school children attend the parochial schools. Nevertheless, but ten cases were reported as existing in two of the numerous parochial schools in that section of the city.

On the part of the management of the local Board of Health it was found that they had held frequent special meetings with reference to the unusual prevalence of diphtheria but had made no one particular effort to eliminate the disease except a resolution which was placed in force on October 26th. This resolution is as follows:

Lancaster, Pa., October 26, 1911.

A Resolution Requiring all Practicing Physicians to Have Bacteriological Examinations to be Made in Cases Suspected of Being Diphtheria, and Prescribing a Penalty for Violation Thereof:

Be it Resolved, That notice be given to all physicians practicing in the City of Lancaster, that in all cases diagnosed or suspected as diphtheria, a bacterial examination must be made of the suspicious membrane from the throats.

Culture tubes will be furnished to physicians by the Board of Health, or the Medical Inspector will take cultures if so desired.

The penalty for disobedience of this resolution shall be a fine of \$5.00 to be recovered before any Alderman or Justice of the Peace in the same manner as debts of like amount are recoverable.

By action of the Board,

Attest: D. H. Heitshu, Secretary.

JAMES SHAND, President.

Modified quarantine was the universal practice; however, this was not being observed and individual cases which were studied showed

that the infection had been transmitted from house to house by the visits of relatives and friends. A circular on the disease, which is a facsimile of the circular on diphtheria issued by the State Department of Health, was handed to each householder, notifications were sent to the teachers of public and Sunday schools and also to the Library, as practiced by the State Department. However, it was found that there was no attempt to determine whether the provisions of modified quarantine, as defined in the rules and regulations of the State Department of Health, were being enforced and it was the custom to give quarantine permits without regard to need or occupation.

There seems to be a notable lack of information among the physicians practicing in Lancaster, (as may be found at any other point in the State) with reference to the proper idea as to what constitutes modified and absolute quarantine and as to the beneficial results which are had by the proper knowledge and co-operation of the physicians.

These matters were taken up and discussed in detail at a special meeting of the Board, held at three P. M. Under your authority, I advised them to establish absolute instead of modified quarantine, to prolong the quarantine period if, after a careful study of the conditions, they felt justified in so doing; to require negative laboratory findings from the nose and throat of patients and all contacts of patients before their release from quarantine, and to take such measures for disseminating proper information to parents, teachers and physicians as they found it expedient to present. It was emphasized that it was particularly advisable to inform the parents of their responsibility in maintaining quarantine and to issue such instructions to the physicians as would lead to the proper maintenance of domestic quarantine. If absolute quarantine were to be established, it was advised that they permit the removal of the wage earner after disinfection of his person and clothing, to the home of adults only, in order that he might continue his work, with the provision that he was not engaged in the sale, production or manufacture of materials which would transmit the infection. These recommendations were accepted in toto.

The Lancaster Board of Health consists of:

James Shand, President; E. S. Snyder, M. D.; Theodore B. Appel, M. D. S. W. Miller, M. D. F. S. Groff, Esq.; D. H. Heitshu, Secretary; Charles P. Stahr, M. D., Medical Inspector; James H. Deen, Sanitary Officer and Health Commissioner.

Dr. Snyder is President of Common Councils. The members are appointed each year by the Judge of the Court of Common Pleas, under an Act entitled, "An Act amending the charter of the municipal corporation of the City of Lancaster, dated April 5th, 1867," of which

Section 39 reads—"The Court of Common Pleas of said county be and they are hereby authorized to appoint, yearly, a board of health, consisting of four resident real estate owners of said city, who shall serve, without receiving any compensation therefor."

The City Solicitor has recently given an opinion stating that resolutions of the Board will have no force unless passed as ordinances by Councils and approved by the Mayor.

The inconsistency, in relation to their powers and duties, of the method of appointment and the Solicitor's opinion, has led to hesitancy in exercising any unusual power and, in part, has caused the prolongation of the present outbreak. It was the intention to delay action on the recommendations given until the approval of the Mayor had been secured. However, I advised that, if the members were satisfied that they were legally appointed and organized, it was possible for them to put into force any Act of Legislature and Rule and Regulation of the State Department of Health, without waiting for approval. They at once made preparation to enforce all recommendations.

INVESTIGATION OF SCARLET FEVER, HANOVER, YORK COUNTY, DECEMBER 6, 1911.

By your instructions I proceeded to Hanover, York County, on December 6th, 1911 in order to investigate for the Hanover Board of Health the non-reporting of cases of scarlet fever. The members of the Board are: Luther B. Horn, President, Dr. C. M. Brown, Dr. M. M. Fleagle, David Emlet and F. Y. Stambaugh, Secretary and Health Officer. It was desired to have the correct diagnosis established in the case of Isabel Allenwalt, under the care of Dr. Keagy: a case of suspicious sore throat under the care of Dr. A. C. Wentz, and a case diagnosed as quinsy, named Lee Bower, under the care of Dr. C. E. Bortner.

Diphtheria and scarlet fever have been reported in the borough of Hanover as follows:—

1911	Diphtheria Scarlet Fever.	
July,	0	0
August,	1	0
September,	2	0
October,	3	1
November,	3	1
December,	1	0
	<hr/> 10	<hr/> 2

Of these, the scarlet fever cases and all but two of diphtheria, were either children attending or were contacts of children attending the Walnut School Building. I conferred with Prof. J. C. Carey, Principal of the public school system, Dr. M. M. Fleagle of the Board of Health, and F. Y. Stambaugh, and in their company made an inspection of the Walnut School Building.

There are four school buildings with thirty-two rooms in use in Hanover, under the care of thirty-two teachers. The Walnut Building, though new and modern compared with the other buildings, has for some time been regarded as the source of transmission of most of the cases of communicable disease. The reasons have not been apparent to the local Board of Health. There has been considerable complaint as to the sanitary conditions in a nearby alley because of discharges from pig pens and stables, the affluent draining past the school entrance. Other than this there are no external conditions to suggest a reason for the prevalence of disease at this building. The building itself has ample air space, is equipped with individual seats, the Smead-Welt method of indirect radiation and has a large common playground. The system of radiation is badly placed and in certain instances the rooms are getting less than minimal results. The cold air intakes pass directly through the toilets in the basement. It was thought by Professor Carey that some method of transmission through this source might account for the transmission of the disease in that building, but it was pointed out to him that the rooms in which there was sufficient radiation were those in which there were no children sick.

The cloak rooms are poorly ventilated and until recently the common drinking cup was in use, provision being made to supply fountains. There is no provision for medical inspection. Careful census of the children who had been absent indicated that in certain instances physicians were either not called in attendance or were called so late by parents that there was ample opportunity for contact transmission.

The case of Isabel Allenwalt, who has been absent from school from November 6th to 24th was not scarlet fever. There are no evidences in the throat at the present time that the child had been suffering from a communicable disease, nor were there any signs of desquamation. Two children in the same household in direct contact have not developed the disease. Dr. Keagy stated that the children were suffering with "colds" but was unable to give a more specific diagnosis. The case under the care of Dr. Wentz was shown to be one of peritonsillar abscess while the one under the care of Dr. Bortner was one of streptococcic pharyngitis, diagnosed bacteriologically.

The value of medical inspection of all school children was pointed out and the following recommendations were made: That where it

was impossible to secure results through modified quarantine, absolute quarantine should be established for a period of ten days and that every room should be disinfected and closed for a period of ten days if a child sickened in the room.

REPORT OF INVESTIGATION OF AN EPIDEMIC OF TYPHOID FEVER IN THE TOWN OF BLANDON AND VICINITY, BERKS COUNTY.

In accordance with your instructions I proceeded to Blandon, Berks county, on December 9th, 1911 in order to investigate the reasons for the prevalence of typhoid fever in that community.

Blandon is an unincorporated town in Maidencreek Township, having an estimated population of between six and seven hundred persons. The investigation included additional cases occurring in nearby townships, the population for the entire district covered being, according to the census of 1910, as follows:—

Maidencreek Twp., 1,941

Ruscombmanor Twp., 1,059

Richmond Twp., 1, 678

The only industry in Blandon is the Blandon Rolling Mills Company which is owned and managed by the Simon Seyfert Estate of Reading, Pennsylvania. This plant employs 230 men, 90 of whom work at the furnaces. Through the courtesy of Mr. F. E. Plüm, Superintendent, I secured all of the information relative to the works and village which is presented in this report.

The residential water supply is entirely from dug wells sunk into lime stone rock, that from the rolling mills is obtained from two sources. Three artesian wells have been sunk at various times during the past five years which furnish water for drinking purposes and in times of drought are used also for manufacturing purposes. As a rule one of these wells is in use. Well No. 1 is 280 feet deep and well No. 2 is 275 feet deep; they are located in the pump house and are cased to a depth of 100 feet to rock and are well capped. Well No. 3 is located at the side of the dam about 600 feet from the pump house; it is 325 feet deep and is cased to a depth of 100 feet. The water is raised and distributed by force pumps.

The water for manufacturing use is obtained from a small stream which rises west by south of Blandon some three quarters of a mile from the mill. This stream flows north west to the Philadelphia & Reading Railroad Company's dam, the overflow of which is caught

in a dam belonging to the Blandon Rolling Mills Company and constitutes their sources of manufacturing supply. It is conducted from the dam to the mill by three pipes; one 6 inch pipe carries the boiler supply, one 6 inch pipe distributes to the 11 inch and 8 inch mill, including the boshes, and one 4 inch pipe distributes water to the other portion of the plant. The intakes for these pipes is well above the bottom of the dam.

There is no sewerage system for this community. The usual type of privy is maintained in all private residences. The sanitary arrangements for disposal at the plant are unusually well carried out. There is no evidence that the vaults so used could be the source of infection.

I was accompanied on this investigation by Sanitary Officer M. Z. Fredericks who made a census of 35 cases, a tabulation of which is herewith presented.

Onsets.

November 15,	1	December 2,	1
November 18,	1	December 3,	1
November 20,	3	December 5,	1
November 21,	1	December 6,	1
November 22,	2	December 7,	1
November 24,	2	December 8,	1
November 25,	5	December 12,	1
November 27,	5	December 14,	2
November 28,	4		
November 29,	1		
December 1,	1	Total,	35

Age.

15 to 19,	3
20 to 24,	7
25 to 29,	7
30 to 34,	5
35 to 39,	2
40 to 44,	4
45 to 49,	1
50 to 60,	3
Unstated,	3
	35

Occupation.

Engineer,	1
Watchman,	1
Rougher,	4
Roller,	4
Hooker,	2
Heater,	3
Heater's Helper,	5
Puddler,	10
Puddler's Helper,	5
	35

Sex.

Males,	35
Females,	0
	35

Employment.

Blandon Rolling Mills,	34
Switchman, P. and R. R. R., ..	1
	35

Mortality.

There were 3 deaths during December, a mortality of 8.5 per cent.

Total population,	132
Average per house,	4

Water.

Dug well and mill,	20
Dug well, cistern and mill,	5
Cistern and mill,	8
Spring and mill,	1
Artesian well and mill,	1
	35

Milk.

Dunkle,	18
Dunkle and Maderia,	1
Moyer,	3
Maderia,	1
Straner and Delp,	1
Stoppie,	1
Heller,	1
Goodyear,	1
Own cow,	5
Unknown,	3
	<hr/>
	35

Distribution by Townships.

Maidencreek Township,	28
Ruscombmanor Township,	4
Richmond,	3
	<hr/>
	35

Typhoid fever has not been prevalent in these townships and there is no evidence that the few cases which have been reported were the source of the present infection. The morbidity for the three townships studied for the years 1909, 1910 and 1911 to the date of investigation is as follows:—

Maidencreek Township.

	1909	1910	1911
March,	0	0	1
April,	0	0	0
May,	1	0	0
June,	0	0	1
July,	2	0	0
August,	1	0	0
September,	1	1	0
October,	0	0	0
November,	1	0	5
December,	0	0	0
Total,	<hr/> 6	<hr/> 1	<hr/> 7

Ruscombmanor Township.

	1909	1910	1911
March,	0	0	0
April,	1	0	0
May,	0	0	0
June,	0	0	0
July,	1	0	1
August,	1	0	0
September,	0	2	2
October,	0	0	1
November,	0	0	0
December,	0	0	0
Total,	<hr/> 3	<hr/> 2	<hr/> 4

Richmond Township.

	1909	1910	1911
March,	0	0	0
April,	2	0	1
May,	0	1	0
June,	0	0	0
July,	0	0	0
August,	1	0	0
September,	0	1	0
October,	0	0	1
November,	0	0	1
December,	0	1	0
Total,	<hr/> 3	<hr/> 3	<hr/> 3

A study of the tabulations reveals the following important facts, first, that the infection was a scattering one extending over a period of 30 days; that all those who became ill with the disease were males; that none were under 15 years of age; that 34 of the 35 cases were employed in the plant of the Blandon Rolling Mills Company; that 29 of the 35 cases were employed in positions which were near the boshes; that every case used mill water while at work while the sources of water supply at home were from dug well in 20 instances, dug well and cistern in 5, cistern in 8, spring in 1 and artesian well in 1; that the milk supply for the 35 cases was obtained from 14 different dairies.

A careful investigation of the water used for drinking purposes by the men while at work indicated that it was customary to rinse the face and hands with cold water from the boshes and at the same time to use this water for drinking purposes; for some unaccountable reason the water from the artesian well which was widely distributed at convenient points was not considered as desirable as the water directly from the small stream.

A physical examination of the stream in question was made from the point of intake from the mills to the head waters. The rate of the flow of the stream could not be determined; at the time the waters were clear and the flow was free. It flows through an open country, all timber having been removed a long time past. After rainfall the changes in the flow and character of the water are rapid, there being the usual quick rise followed by a rapid subsidence to normal. At these times the water supply in the dam and throughout the mill from this source shows marked turbidity and the flow is so great that occasionally the dam breast is, in part, washed out. A storm followed by such a flood period occurred on November 21st. During periods of drought it is necessary to pump water from the artesian wells into the dam, usually this occurs only during summer time and the well near the dam is the one used for that purpose.

One quarter of a mile above the dam was discovered on the premises occupied by F. B., the only source of pollution; the premises consist of a house with four occupants, a barn, hog pen and chicken pen, which are 200 feet distant but have direct drainage into the stream, and a water closet, which is 150 feet distant, overflowing, and with direct drainage into the stream. No cases of gastro-intestinal disease has occurred among the occupants of this house.

A record of the precipitation for the month of November occurring at Reading, six miles south, Hamburg, nine miles northwest and Seisholtzville, fifteen miles east, is as follows:—

PRECIPITATION.

Date.	Reading.	Hamburg.	Seisholtzville.
November 6, .....	.74	.55	.85
November 12, .....	.39	.84	.56
November 14, .....	.33	.75	.65
November 15, .....	.29	....	....
November 17, .....	....	2.05	....
November 18, .....	.87	....	.97
November 22, .....	....	.65	....
November 24, .....	.76	....	.86

It will be observed that the unusual precipitation occurring in all three points of observation on November 6th was the first rainfall which would account for the changes in the stream supplying the water, the second period of rainfall was during November 12th and 14th and the third, November 17th and 18th, while a fourth division would be November 24th. Corresponding to this grouping we find the infection continuing between the dates of November 15th and December 14th so far as is indicated by the dates of onset. An additional factor in the time distribution of cases is found in the boshes; these have intake and overflow at the top. Periods of subsidence are allowed between "heats;" the changing of implements used in work which are placed in the boshes to cool would stir up any sediment in the boshes. It is reasonable to infer that there are two factors in relation to the long continuance of the infecting agent.

There were no temperature changes of sufficient importance to affect changes in the water supply, the average lowest temperature recorded during November being 31.9 F. and at no time was a freezing temperature recorded.

The analyses of all water supplies gave entirely negative results and for that reason efforts were made to secure specimens of water following a rainfall of some magnitude. However, during the period in which the supply was under observatoin there was no unusual precipitation and there were no cases of typhoid or other intestinal disease reported from this community.

On and after November 6th a number of cases of diarrhoeal disease had occurred among the employees, at times as many as 20 per cent. having been absent from duty, while others continued to work though troubled with the symptoms incident to the infection. On the first day of investigation 25 of the 35 cases studied had been ill sufficiently long for a diagnosis to have been established. However, but five cases had been so diagnosed and reported by the various attending physicians. Because of the history of epidemic dysentery and the failure to diagnose, a report of the results of the examination

of the blood, intestinal discharges and clinical symptoms of cases having dates of onset between November 18th and December 6th is herewith presented.

CENSUS NUMBER.

- Case No. 1. Onset November 18th, age 43 years. History of prolonged prodromata, constipation, markedly tender over entire colon, no headache. Positive agglutination to *B. paratyphosus* A.
- Case No. 2. Onset November 24th, age, 28 years. History of abrupt onset, diarrhoea, occipital headache, marked pain (not ache) lumbo-dorsal region. Diagnosis—"La Grippe" by attending physician. Agglutination reaction positive to *B. typhosus* and slightly so to J 90 A and J 90 C.
- Case No. 3. Onset November 21st, age 60 years. Typical typhoid fever, prodromata and clinical course. Agglutination positive to *B. typhosus* and slightly so to J 90 C.
- Case No. 6. Onset November 22nd, age 20 years. Typical typhoid fever and a typical clinical course. Agglutination positive to *B. typhosus*, to J 90 A, J 90 C and slightly so to *B. para coli*, *B. typhosus* B and J 93. Diagnosis—"La Grippe" by attending physician.
- Case No. 7. Onset November 22nd, age 25 years. History of abrupt onset, marked pain in transverse colon, followed by diarrhoea and epididymic tenderness; no headache or malaise. Agglutination positive to *B. typhosus*, to J 90 A and J 90 C. The pathogenic organisms isolated and identified from the stools were a large diplococcus and *B. paratyphosus* B.
- Case No. 10. Onset November 27th, age 44 years. Onset and clinical course similar to abdominal influenza: diagnosed "La Grippe" by attending physician. No specimens of blood could be obtained from this case. Pathogenic organisms of feces were a large diplococcus and *staphylococcus albus*.
- Case No. 11. Onset November 28th, death December 14th, age 23. Typical typhoid fever prodromata, blood examination negative, specimen was collected on seventh day after onset.
- Case No. 12. Onset November 25th, age 31 years. Abrupt onset with diarrhoea, no headache, pulse disproportionately slow, positive roseola and perisplenitis. Agglutination positive to *B. typhosus* and J 90 C.
- Case No. 13. Onset November 24th, death December 15th, age 34. A typical onset with diarrhoea and occipital headache and colonic tenderness. Specimens of blood could not be obtained. Pathogenic organisms found in the feces were streptococcus and a large diplococcus and *B. typhosus* A.
- Case No. 15. Onset November 25th, age 50 years. Had had typhoid fever 20 years ago, has been running a subnormal temperature since onset, which was abrupt with chills. Blood specimens destroyed in transit. Pathogenic organisms found in the feces were *staphylococcus aureus* and *albus* and a large diplococcus.
- Case No. 19. Onset November 27th, age 42 years. Onset of the abdominal influenza type, diagnosed "La Grippe" by attending physician. Pathogenic organisms found in the feces large diplococcus, *B. typhosus* and *B. enteritidis*. Specimens of blood could not be obtained.
- Case No. 28. Onset December 6th, age 20 years. Onset abrupt with diarrhoea, diagnosed "La Grippe" by attending physician. Specimens of blood destroyed in transit. Pathogenic organisms found in the feces were diplococcus and streptococcus.

These studies indicated that we were dealing with an infection which was not caused by one type of micro-organism and, if the term "*mixed infection*" in relation to the typho-colon group, is permissible, the Blandon outbreak can be so classified. Of the 35 cases reported as typhoid fever

63 per cent. gave the history of abrupt onset

18 per cent. were influenzal in type

37 per cent. only gave a history of typical typhoidal prodromata.

A study of the blood of 9 cases resulted as follows:—

Positive agglutination reaction with <i>B. typhosus</i> B	....	4
Positive agglutination reaction with <i>B. typhosus</i> B	....	1
Positive agglutination reaction with <i>B. typhosus</i>	}	1
<i>B. paratyphosus</i>		
<i>B. paracoli</i>		
Negative,	.....	1
Blood destroyed in transit,	.....	2

The agglutination was studied in relation to *B. typhosus*, *B. paratyphosus* A and B., *B. paracoli*, *B. enteriditis*, *B. suicepticus*, *B. dysenteriae* (Shiga), *B. dysenteriae* (Harris) and to five micro-organisms isolated from feces of certain of the cases.

A dilution of 1:50 and a period of one hour was used throughout. A study of the feces resulted in the isolation of the following:

J 90 A—*B. typhosus*.
 J 90 B—*B. enteriditis*.
 J 90 C—*B. typhosus*.
 J 92 —*B. paratyphosus* A.
 J 93 —*B. paratyphosus* B.

The epidemiologic diagnosis of typhoid fever preceded by an outbreak of bacillary dysentery was fixed and the attending physicians were so notified. The Superintendent of the Rolling Mills Company, the work of which had been seriously impaired, desired to carry out at once any recommendations made. He was advised to drain and disinfect all boshes, to abolish the common drinking cup and to post warning placards in conspicuous places, and particularly at the boshes, to the effect that the water was dangerous to health and life and should not be used at any time. These measures were put into effect at once and on their own responsibility they attached a penalty clause for infraction of the order not to use the water for drinking purposes from the boshes.

The general sanitary conditions in the community were excellent; no overflowing privies were found and the disposal of garbage as sanitary as could well be carried out in a rural community. The evidences of care is found in the fact that there were no secondary cases.

INVESTIGATION OF DIPHTHERIA AT STROUDSBURG STATE NORMAL SCHOOL EAST STROUDSBURG.

By your instructions I proceeded to Stroudsburg, Monroe county, on December 14, 1911, in order to investigate the prevalence of diphtheria among the students of the Stroudsburg State Normal School.

17—16—1913

The latter is situated within the borough limits of East Stroudsburg, which has a population of 3,330. The Principal of the School, Professor E. L. Kemp, is assisted by 18 teachers in the supervision of 457 pupils.

There were no cases of diphtheria present in either East Stroudsburg or Stroudsburg until October 1, 1911, when Cora Bush, a child aged three years became ill with the disease, the source of the infection being unknown. She died the same day, the cause of death being given as "croup" by the attending physician, Dr. J. A. S. A funeral permit was issued from the office of the local Registrar and a public funeral was conducted.

On October 24th Carl Watson, aged one and one-half years, became ill with the disease, dying the same day, a diagnosis of membranous croup convulsions being given as cause of death by Dr. J. A. S. In a personal visit to the Registrar at the time he stated that it was unquestionably a non-communicable disease and was not diphtheritic in its etiology. The usual permit was issued by the Registrar and a public funeral conducted.

On November 28th the same physician was called to see Etta May Heller, aged five and one-half years, her death occurring on December 3rd cause being given as croup and bronchitis. This child was a pupil in the Normal School Kindergarten. The usual permit was issued by the local Registrar and a public funeral was conducted.

From April 1911 up to the present time Dr. W. L. Angle, East Stroudsburg, has been acting as Registrar in place of Harry Smith, the authorized Registrar.

The next patient to become ill was Dorothy Dibeler, aged fourteen years, whose home was in Bushkill, Pike county. She was removed to her home on the day following onset of the illness and prior to a physician being called in attendance. Dr. L. B. Smith, of Bushkill, saw her after her removal, made a diagnosis of diphtheria and notified Dr. Angle, asking him to confirm the diagnosis, in which Dr. Angle acquiesced.

On December 12th, a child aged twelve years by the name of Prugh, who had been a contact with Dorothy Dibeler, become ill and a diagnosis of diphtheria was made by Dr. William Levering of Stroudsburg, on December 13th. She was immediately removed to the Infirmary of the Normal School. A teacher who had been in constant contact with her was also removed to the Infirmary and given an immunizing dose of diphtheria antitoxin.

On December 11th Madeline Dowling, aged fourteen years, became ill at the Normal School but as she was a day student (her home being in East Stroudsburg) Dr. Angle who was called in attendance first saw her at the home of her father, George Dowling. He diagnosed diphtheria and reported the case to the local Board of Health.

Three cases of Pharyngitis were isolated and cultured for diagnosis.

Investigation of the management of the Normal School with reference to quarantine indicates that there is no possible avenue for the disease to be transmitted through any other medium than personal contact. The milk supply is the product of one farmer who delivers his entire output. The kitchen refuse is placed in containers and taken to an isolated island, some two miles away, where it is fed to hogs which are the property of the school. Express packages and mail are delivered to the office of the Superintendent, from which they are distributed by messengers within the building.

The School was placed under temporary quarantine on December 13th by Dr. Angle and classes on that day were discontinued. The day students who were living in East Stroudsburg, Stroudsburg, Portland and other neighboring boroughs did not return to school on December 14th. Five male boarding students left on the night of December 13th and morning of December 14th going to their homes in Lackawanna and Monroe counties. A list of all day students and of boarding students who were absent was obtained and the local health officers and Board of Health notified to keep them under parole observation for a period of ten days.

The teachers and students at the school were placed under ten day quarantine; 8 girls who were leaving, having escaped by means of the fire-escape, willingly returned when the conditions were explained. There was no serious panic though some of the girls suffered more or less with hysteria.

Cooperation on the part of the railroads was obtained through the courtesy of Mr. Louder, Station Agent at East Stroudsburg, and F. E. Clarke, Superintendent of the local division of the D. L. & W. R. R. No persons known to the train or station employees were admitted to trains without a passport signed by myself or Dr. Angle.

The East Stroudsburg Board of Health consists of Mr. A. F. Schmalstieg, President; Oscar Imbt, Joseph M. Crystal, Secretary; Andrew Price, Health Officer and Dr. J. A. Singer, who recently resigned. All of the men mentioned are appointees of councils as members of the Board of Health. Messrs. Crystal and Price have been accepting salaries for their respective positions. I informed them as to the proper organization of a Board and of the illegal acceptance of compensation when members of the Board. They asked to have the State Department of Health cooperate and advise them in the management of cases that may occur in the borough and especially in the care of contacts. They placed all of the day students who had been in contact with cases at the Normal School under parole observation. It is their intention to have reorganization of the Board.

INVESTIGATION OF SMALLPOX, YORK, YORK COUNTY, PA.
December 29, 1911.

Complying with the telephone request of Dr. William H. Treible, Medical Officer for the Sanitary Committee of York, York county, I proceeded to that city on December 29th, 1911, in order to establish the diagnosis in three cases supposed to be smallpox. The history follows:—

Some three or four weeks past, M. E., aged eleven years, the daughter of E. E., was taken to the office of Dr. William H. Bacon, suffering with a severe lesion at the base of the third and fourth proximal phalanges on the left hand. Dr. Bacon made a diagnosis of "blood poisoning" and supplied local treatment for the wound. This lesion had appeared gradually while the child was in attendance at school and was not preceded or accompanied at any time by systematic disturbance. About the same time she showed marked infestation by pediculosis parasites. The lesion on the hand was poulticed by the mother and in a few days' time was followed by a slight papular and viscular eruption on the outside of the left leg, on the outside of the thighs, at the bend of the knee and in the gluteal folds. Later the same kind of lesions appeared at various other portions of the body, particularly around the neck, waist and in the scalp. At the time of the examination the entire body was covered with evidences of lesions in all stages. The history of the individual lesion is first the appearance of considerable redness following scratching, small vesicles or pustles being engrafted on these local areas. From the description and the present appearance, they are multiform in type and occurred in all portions of the body and scalp over a period of four weeks, new lesions appearing during the past day or so. Fresh lesions are superficial, vary in size from a pin head to the size of a split pea. They break easily on pressure, are filled with thick yellow pus, are unilocular and have a marked red areola. Those in the crusting stage have somewhat yellowish to brownish friable scales. This patient shows evidence of marked nutritional depravity, suffered with chickenpox at the age of three years, measles at the age of four years, and was successfully vaccinated at five.

The brother, E. E., aged three, developed a furuncle on the left ankle about two weeks past. This was poulticed by the mother, who was also caring for the daughter. The same type of lesions appeared first on the hands and legs and last on the face. The lesions were much larger in size but their general characteristics are the same as

in Margaret. However, the larger lesions, especially on the arms, are covered with thick, brownish to black, imbricated scales. This patient shows marked evidences of infantilism, probably nutritional in origin. He has not previously had a communicable disease and has never been vaccinated.

The mother, Mrs. H. E., aged twenty-nine years, first showed lesions on Christmas day, appearing first on the palmar side of the left wrist and later extending over the same arm. Lesions have not appeared elsewhere. She has never been vaccinated. All three members of the family have the larvae of the pediculosis and the insects themselves on the scalp and clothing. The sanitary conditions are deplorable inside and outside of the home.

A diagnosis of secondary infection in pettigiform in character following the scratching of the bites, due to the presence of pediculosis, was made. It was suggested to Dr. Treible, who was present during the examination, that the temporary quarantine established was not necessary though school exclusion should be enforced until he could give a certificate of freedom from disease.

REPORT OF THE INVESTIGATION OF ATYPICAL SCARLET FEVER, WESTTOWN BOARDING SCHOOL, WESTTOWN, CHESTER COUNTY.

December, 1911.

After a conference between Dr. B. Franklin Royer and myself, I proceeded to West Chester, Chester county, on December 27th in order to establish the diagnosis of an apparently transmissible disease infecting the students in the Westtown Boarding School.

HISTORICAL.

The enrollment for the present season is 214, 116 boys and 98 girls, ranging from 8 to 18 years of age. In the main buildings there are 25 officers and teachers while on the outside, residing on other premises not in immediate contact with the officers, teachers and pupils, are a large number of employees in charge of the farming, dairy, heat and light plant and other duties. The visiting physicians to the school are Dr. William T. Sharpless, of West Chester, and Dr. E. L. Clark, of Media. According to the statement of the former there had been no previous communicable diseases in the school during the present term until some two weeks prior to the investigation, beginning on or about December 3rd or 4th, when a number of

students were reported to the authorities as having sore throat. The first case giving a history of eruption was called to the attention of Dr. Sharpless on December 21st.

This patient, A. L. T., developed his onset on the evening of December 20th. There was no history of nausea or vomiting and he did not have an unusually rapid pulse; his temperature, as reported by Dr. Sharpless, ranged between 100 F. and 102 F. A "granular rash" developed first on his chest and upper abdomen; his entire body was bright red, first on the chest, somewhat later on the abdomen and back; last a rash appeared on both thighs; it was not limited to the flexor surfaces and there was little or no rash on the face. Examination of the tongue showed no enlargement of the papillae. The color of the throat was dark red and extended over the tonsils, uvula, faucial pillars and the soft palate; there was but little change in color of the posterior pharyngeal wall and there was no evidence of membrane formation. The posterior cervical glands were somewhat enlarged but there was no involvement of the post auricular lymphatic glands. This patient was desquamating when he left the Institution.

County Medical Inspector, Dr. Joseph Scattergood, West Chester, was consulted by telephone and, under special provision, the patient was permitted to be removed to his home at the Pennsylvania Hospital at Philadelphia. Dr. Scattergood at the same time notified Dr. A. A. Cairns, Chief Medical Inspector of Philadelphia. The case was treated as one of suspicious scarlet fever, and was placed in an isolation ward at his home.

According to a telephone conversation with Dr. Cairns on December 28th, this patient gives a history of having had scarlet fever three years ago and was treated for three distinct attacks of measles by Dr. A. V. M. The physician in attendance diagnosing the present disease as scarlet fever is Dr. A. N. He was accompanied to Philadelphia by two school friends, H. M. B., of Germantown and S. M. of Olney. Immediately on arrival at their homes these two boys were placed under the care of Dr. E. G. R. of Germantown who made a diagnosis of German measles. The machine in which they were removed from Westtown to Philadelphia was the property of the Hook Garage in Philadelphia and was immediately disinfected under the direction of the Philadelphia health authorities.

Two of the students whose homes were in Chester county were removed to the Chester County Hospital in West Chester. The history of these two cases is as follows:—

J. R. J., son of J. E. J., West Chester, aged 16, developed sore throat on the morning of December 20th. The evening of that date he went to the nurse for treatment and was immediately sent to the Infirmary. He had been perfectly well on retiring on the evening

of the 19th and had no other symptoms than sore throat at any time. He had not been absent from the Institution within five weeks of date of illness.

On December 21st a rash appeared on the chest and upper abdomen but was noted nowhere else. It was said to be a finely punctate rash of dark red color. He was admitted to the hospital on December 22nd.

His temperature on the morning of December 23rd was 99.4, on December 24th, 99 and on December 25th, 98.4, since when it had been normal. The pulse at no time was over 96. There was some enlargement of the posterior and anterior cervical glands but not of the post-auricular lymphatic glands.

On examination on December 27th, 1911, the throat showed a diffuse redness without signs of lesions of any character having been present on the mucus membrane of the mouth or throat. The tonsils show chronic indurative hypertrophy. There was no evidence of an eruption or of desquamation. Three smaller areas of tinea versicolor with a branny desquamation were present on the chest. The patient who is intelligent and observant, states that at no time did he note a rash on any other portion of his body or extremities. His face was free at all times. Urine examination, made on entrance, was also negative. On December 26th urine examination showed the following:—

Specific gravity 10-19.

Reaction—acid.

Albumin—a distinct cloud.

Sugar—negative.

Microscopic: hyaline casts red blood cells, leukocytes.

December 27th:—

Specific gravity 10-14.

Reaction—acid.

Albumin—a distinct cloud.

Microscopic: a few leukocytes, leukocytic and hyaline casts.

The other patient, C. E. J., son of Mrs. M. E. T., of West Grove, aged 17 years, developed sore throat on the morning of December 20th, and there was also considerable swelling of the right tonsil. Dr. E. L. C. of Media, made a diagnosis of tonsilitis, and on the evening of December 21st made a diagnosis of German measles. As he had been in company with R. J. and had developed some rash on his chest and upper abdomen on the evening of December 21st he was sent to the Chester County Hospital.

On examination on December 27th there was marked chronic indurative hypertrophy of the tonsils. There was some enlargement of the auricular and posterior cervical glands but not of the post-auricular. There was no evidence of a rash or desquamation. His temperature on December 23rd was 98.8. His pulse did not range above 90 at any time. Urine examination was negative.

Both of these boys have previously had attacks of chicken pox and measles.

On December 22nd, C. B. went to 630 North 32nd Street, Philadelphia to spend the holiday season with her mother. She had sore throat on and after December 21st. On the morning of the 24th an eruption was noted and Dr. N. F. L. of No. 1925 Chestnut Street, Philadelphia, was called in attendance, making a diagnosis of scarlet fever. This diagnosis was confirmed by Dr. M. S. C. The patient was removed to The Philadelphia Hospital for Contagious Diseases, where the diagnosis was again confirmed by Dr. Wm. M. Welch.

DIAGNOSIS.

Between the dates of December 17th and 21st, 20 of the girls and 11 of the boys developed either pharyngitis or tonsilitis. It is customary for all students when ill to report to the nursery where they are inspected by one of three nurses and, after the nurse's diagnosis has been made, if it seems justifiable, the patient is sent to the Infirmary. Among those who developed the illness between the dates mentioned some were sent to the Infirmary while others were permitted to return to their rooms.

In the examination made by the attending physicians prior to December 22nd the girls were not examined for an eruption; among the boys who were examined the general features described in the histories noted above, except the extent of the rash, were observed in each case—an acute onset with sore throat, which, on examination, was found to show a diffuse uniform erythema; some enlargement of the post cervical glands; no enlargement of the post-auricular glands; some showing on the one or two examinations no evidence of an increased temperature while others developed a temperature ranging from 101 to 102, which lasted but a few days in those kept under observation in the Institution.

On the morning of December 22nd the students and a large number of officers and teachers left for the holiday vacation. For this reason it was impossible to make an examination of any others than the two patients in the Chester County Hospital; the possible diagnoses considered were German measles, Scarlet Fever, Septic Sore Throat and Diphtheria. German Measles was excluded from consideration by the history and entire absence of enlargement of the post-auricular glands, by the constant scarlatini-form type of eruption in those examined, by the presence of desquamation of a distinct type and by the absence of coryza in every case. The possibility that we were dealing with a septic sore throat such as occurred in Boston during May, 1911 and was described by Dr. C. E. A. Winslow in the Boston Medical and Surgical Journal, December 14, 1911, C. L. XV No. 24, was excluded by the mildness and limitations of clinical symptoms and signs. The so-called "Fourth or Dukes' Disease" was mentioned but was not considered as a consensus of the opinion of the most

careful observers indicates that there is no such clinical entity. Diphtheria was excluded by observations made on examinations of throats and by the presence of a rash which bore no relation to treatment or other factors.

The diagnosis was necessarily based largely upon epidemiological data and the few patients which could be studied. The history of marked desquamation in case No. 1; of the diagnosis of scarlet fever by the attending physicians in cases No. 25, No. 26 and No. 32; by the careful examination of cases No. 27 and No. 28, with a marked abruptness of onset of sore throat and tonsilitis in 34 persons closely associated; and by the absence of observed eruptions in the majority.

The history of 34 students was compiled from information obtained from the matron, from the nurses' record book, by examination of the two cases in the Chester County Hospital, the statements of Dr. Sharpless and Dr. Scattergood and the information obtained by telephone from the attending physician in cases in other cities. Information was received that cases No. 11, No. 14 and No. 16 were suffering with rubella as diagnosed by the attending physicians, Doctors E. G. R. and E. L. C. The urine examinations of cases No. 2 and No. 31 indicated a well marked acute desquamative nephritis although a history of skin eruption could not be obtained from the attending physician, Dr. E. M. Cases No. 27 and No. 28, both of whom had a transient scarlotini form eruption on the chest, and in No. 28 also on the neck, showed the urinary signs of acute nephritis.

Later, the history of case No. 30 was obtained. This patient, a girl aged 17 years, developed milk tonsilitis on December 20th while at the school. She was seen by the family physician, Dr. J. H. F., at her home on December 24th. He did not see her again until after her death on January 1st, 1912, at which time he signed a Death Certificate stating that she had died of "malignant typhoid fever," date of onset December 23rd, 1911. There is evidence that this patient had septic endocarditis and arthritis.

This data seemed to justify, for the purpose of sanitary supervision, a diagnosis of Atypical Scarlet Fever.

The school was not reopened until the second week of January. On January 12th, three additional cases, No. 35, No. 36 and No. 37 respectively, developed the same disease with the presence of a rash. No. 35, a male, aged 18 years, was a brother of case No. 1. No. 36, a female, aged 25 years, a clerk in the school, was in contact with cases No. 2 and No. 31. No. 37, a male, aged 13 years, was not shown to have any contact with a case during his absence from the school. These cases were reported as scarlet fever to the Health Officer and were so treated in accordance with quarantine regulations.

Dr. Wm. M. Welch, of Philadelphia, was called in consultation and gave a verbal opinion, subsequently confirming it in writing, as follows:—

DEPARTMENT OF PUBLIC HEALTH AND CHARITIES BUREAU OF
HEALTH—PHILADELPHIA HOSPITAL FOR CONTAGIOUS
DISEASES.

Philadelphia, March 2, 1912.

Dr. William T. Sharpless,
100 South Church St.,
West Chester, Pa.

"Dear Doctor Sharpless—

I must confess that I do not feel absolutely sure of the diagnosis of the cases which I saw with you at the Westtown School. At first I felt that the disease was either scarlet fever or rubella. I now feel that rubella can be excluded. The disease is undoubtedly communicable. As I stated to you yesterday, after a careful examination of the most recent case, the affection looks more like mild, atypical scarlet fever than anything else. In 1900, Dukes described an affection which he called the "fourth disease." His account of that affection does not to my mind clearly differentiate it from mild scarlet fever. If the "fourth disease" can be regarded as a clinical entity, then I should feel like placing the cases at Westtown in that category. But as we are trying to protect a school I think it would be wise to give the school the benefit of the doubt and regard the disease as mild, atypical scarlet fever, and make use of the restrictive measures that are commonly applied against that disease."

Very truly yours,

(Signed)

W. M. WELCH.

A tabulation of the cases follows:

Dates of Onset.

	Cases.
December 16,	1
December 17,	2
December 18,	21
December 19,	2
December 20,	4
December 21,	4
Total,	34 Cases

Ages.

	Cases.
10 to 40 years,	7
15 to 19 years,	26
20 to 24 years,	1
Total,	34 cases

Sex

	Cases.
Males,	11
Females,	23
Total,	34 cases

Diagnosis.

	Cases.
Pharyngitis or tonsillitis,	23
Rubella,	6
Scarlet Fever,	7
Malignant typhoid fever,	1
Total,	34 cases

Acute desquamative nephritis developed in 4 of the 9 cases in which a urine examination was obtained. Typical desquamation occurred in all cases diagnosed as scarlet fever.

MORTALITY.

1 Case.

SOURCE OF INFECTION.

The source of infection was difficult to determine because of the impossibility of obtaining sufficient data from the nurses and from some of the officers. We were very much assisted by the matron and the superintendent but it was not until subsequent investigations had been made that the following was learned—A family by the name of Kimes moved from Williston Twp., Chester county, into one of the premises on the Westtown School property during November, 1911. The father, mother, one daughter and a son-in-law did most of the milking at the School Dairy.

On November 30th Elmer Kimes aged 6 years and Walter Kimes aged 3 years were taken ill with slight sore throat, fever and rash over lower portion of the abdomen. The attending physician, Dr. W. W. W. of West Chester made bacteriological examinations of the throats on December 9th, 1911 for B. diphtheria with negative results. The patients were ill but a few days and the rash was not seen by Dr. W. There was no evidence of desquamation. No urine examination was obtained.

Margaret B. Kimes, aged 16 years, developed sore throat on December 20th, 1911 and was under the care of Dr. J. O. D. of West Chester. The history is that of an ambulant illness, sore throat followed within 2 or 3 days with rupture of a peritonsillar abscess, with almost immediate relief; there is no history of eruption. On January 4th, 1912, the tonsils were still enlarged, evidences of a continuing discharge and negative urine. At the time she was employed as a servant in Williston Twp., Chester county, although she had been previously in contact with her family.

It is probable that Margaret Kimes was suffering from peritonsillar abscess and was not in any way associated with the source of infection in the school. However it is equally probable that Elmer and Walter Kimes were suffering from mild scarlet fever and could have readily been a source of transmission to the school. The mother nursed these two children at the same time that she was assisting in the dairy work. There is no history of previous illness of this type among the members of this family. There is no record of reported cases of any eruptive disease except chicken pox in Williston Township, Chester county, nor in the townships of East Goshen, West Goshen, Westtown and Thornbury, Chester county, nor the townships of Edgemont and Thornbury, Delaware county.

HISTORY OF CONTACTS.

There were 171 known contacts with the 34 cases. As a holiday season had begun on December 22nd, these contacts, as well as the known cases, had been distributed over a large portion of America, particularly in New Jersey and Pennsylvania. The distribution of the cases was as follows:—

New Jersey,	7	Wayne (Radnor Twp., first class	
Illinois,	1	Township),	1
Maryland,	2	Haverford Township, Delaware Co.	1
Washington, D. C.,	1	Upper Darby Twp., Delaware Co.	1
Philadelphia, Pa.,	10	Nether Providence Township, Dela-	
West Grove, Chester Co., Pa.,...	2	ware County,	1
Media, Delaware Co., Pa.,	1	Chester County,	5
West Chester, Chester Co., Pa.,...	1	Total,	34 Cases.

The distribution of the contacts was as follows:

Canada,	1	New York,	12
California,	1	North Carolina,	2
Delaware,	4	Ohio,	1
Illinois,	1	Rhode Island,	2
Indiana,	1	South Carolina,	1
Massachusetts,	2	Washington, D. C.,	2
Maryland,	7	West Virginia,	2
New Jersey,	45	Pennsylvania,	2
Avondale,	2	Wallingford,	1
Chester,	4	West Chester,	8
Christiana,	1	West Grove,	1
Clifton Heights,	1	Philadelphia,	26
Coatsville,	4	Bucks County,	2
Kennett Square,	3	Chester County,	7
Lansdowne,	8	Delaware County,	5
Media,	2	Lycoming County,	2
Moreland,	1	Montgomery County,	2
Muncy,	1	Monroe County,	2
Norristown,	1		
Pottstown,	2		87
South Langhorne,	1		
		Total number contacts,	171

Lists of names were sent to the Secretary of each State Board of Health accompanied by the following explanatory letter:—

December 28, 1911.

Secretary State Board of Health.

Dear Sir:—

"We are enclosing a list of students of the Westtown Boarding School, Westtown, Chester County, Pa., who were exposed to mild scarlet fever near the end of the session preceding the Christmas holidays. A few cases diagnosed at that time as tonsillitis and others exposed to them have been found to have scarlet fever. These students went home before we had knowledge of the existence of the disease. For public health purposes we propose to treat each of these cases marked as tonsillitis as scarlet fever. The State's regulation for this disease requires a quarantine period of thirty days from date of onset and thirty days additional school exclusion, so that those having had tonsillitis should not return to Westtown for sixty days from the date of onset of the disease. I know you will co-operate with us in securing proper observation of the laws of this Commonwealth.

Very truly yours,
(Signed) SAMUEL G. DIXON,
Commissioner of Health."

Lists sent to the Secretary of the Board of Health in each city, borough and first class township were accompanied by the following letter:—

December 28, 1911,

Secretary, Board of Health.

Dear Sir:—

"We are enclosing a list of names of students, together with their home address, who recently returned from the Westtown Boarding School in Chester County. A few cases diagnosed at that time as tonsillitis and pharyngitis and others exposed to them have been found to have scarlet fever. These students went home before we had knowledge of the existence of the disease. For public health purposes we propose to treat each of these cases marked as tonsillitis as having scarlet fever. It is advisable to place all of these students under observation for a period of thirty days from the date of onset and permission to return to school must not be granted until sixty days from the date of onset of their sickness in the Boarding School.

Yours very truly,

(Signed) SAMUEL G. DIXON,
Commissioner of Health."

Those cases and contacts living in Second Class Townships of this Commonwealth were placed in charge of the County Medical Inspectors who were instructed as follows:—

December 28, 1911,

Dear Doctor:—

"We are enclosing a list of names of students, together with their home addresses, who recently returned from the Westtown Boarding School in Chester County. They were all exposed to scarlet fever just prior to the close of the autumn session. The period of incubation will not expire until January second. Those marked with an asterisk have had tonsillitis while there and should be treated as scarlet fever. Please place all of these students under observation, deputizing physicians to aid you where you need assistance. Those having tonsillitis must not return to Westtown until sixty days from the date of onset of their sickness in the Boarding School.

Yours very truly,

(Signed) SAMUEL G. DIXON,
Commissioner of Health."

ACTION AND RECOMMENDATIONS.

The Superintendent and Matron were advised as to the opinion based on the investigation, the details of which were outlined in the following communications addressed to Mr. Wm. F. Wickersham, Principal, and W. B. Harvey, Superintendent:—

December 28, 1911,

Mr. Wm. F. Wickersham, Prin.,
Westtown Boarding School,
Westtown, Pa.

Dear Sir:—

"Confirming our telephone conversation of this date, we would advise you that it is necessary that no students or officers who are absent shall be permitted to return to the Boarding School until after January second. This date has been fixed as being the end of the incubation period for all who are in contact with students suffering with scarlet fever. This return to duty can only be made after careful disinfection of the entire premises has been performed and which has been outlined in detail to Mr. Harvey, the Superintendent. This exclusion from school will be sixty days, thirty days on account of quarantine and thirty days additional exclusion after the disinfection following quarantine for each

case. This rule must be applied to the cases of tonsillitis or other sore throat as well as those which have been diagnosed as having scarlet fever or German measles, and we will ask you to co-operate by requiring such exclusion until the entire time has been covered, which will be February 16th. We are asking Dr. Scattergood to instruct those performing this disinfection after the methods approved by this Department, after which you can assure the parents or the guardians of pupils that it is safe to return. This action is necessary in view of the fact that there was such universal contact between the students and instructors and that in all probability the cases of sore throat and tonsillitis which occurred between the dates of December 17th and 22nd were all cases of mild type of scarlet fever. The consequence of even a mild form of this disease has already been observed in the presence of nephritis in certain cases.

If the Department can be of service in advising you, we shall be very glad to hear from you.

Very truly yours,
(Signed) SAMUEL G. DIXON,
Commissioner of Health."

December 28, 1911,

Mr. William B. Harvey, Supt.
Westtown Boarding School,
Westtown, Pa.

Dear Sir:—

"We have already advised Mr. Wickersham that it is not possible for any of the students or officers of the Institution to return for duty until after January second and the performance of thorough and careful disinfection. This action is taken in view of the fact that six cases of scarlet fever have been diagnosed among the many cases of sore throat which were reported to the Nurses between the dates of December 17th and 22nd.

For your information we are enclosing copies of our circular on Room Disinfection and Sanitary Cleaning. We are further asking Dr. Scattergood of West Chester to co-operate with you in seeing that the persons who will perform this disinfection for you are carrying out the methods approved by the State Department of Health. We would advise that every room in the various buildings be thoroughly and carefully disinfected with formaldehyde gas; that all clothing, books and other articles which were in use prior to the holiday should be exposed during this disinfection, and it is advisable that the books of those suffering with sore throat, tonsillitis or rash should be destroyed; that all objects which cannot be subjected to this method of disinfection should be washed carefully with a solution of bichloride of mercury as suggested in the circular on Sanitary Cleaning; that all utensils which have been in use should be disinfected either by boiling or other efficient method. We believe that if these measures are carried out in detail that there will probably not be any return of this contagion unless it should be due to careless management on the part of one who has suffered while away from the Institution.

If the Department can co-operate with you in any way we shall be glad to hear from you.

Very truly yours,
(Signed) SAMUEL G. DIXON,
Commissioner of Health."

In order that there should be a more distinct understanding by Mr. Wickersham who was in New York during the investigation and in the hope that some of the excluded cases might be able to return to the School earlier than the sixty days from the date of onset of their illness, a conference was held in this office on January 5th, 1912 between yourself, Mr. Wickersham, Principal, Dr. Wm. T. Sharpless and myself. In this conference it was agreed and decided that all cases which had been listed as having tonsillitis with the date of onset during the periods mentioned in this investigation should be excluded and treated as cases of scarlet fever.

WESTTOWN BOARDING SCHOOL.

WESTTOWN, PA.

First Month, 5, 1912.

Principal's Office,

Dr. Samuel G. Dixon,

Harrisburg, Pa.

"Dear friend:—

I much appreciate the time and attention thee gave Dr. Sharpless and myself yesterday, and I hope we gave the impression, as is the case, of being heartily in sympathy with the work of the State Board of Health. It looked to us proper to call attention to a possible line of discrimination among the cases put down for 60 days absence; and whatever happens we shall abide by the decision of the Board with a very fair degree of satisfaction.

Very truly,

(Signed) WM. F. WICKERSHAM,

Principal."

January 7, 1912.

"Mr. William F. Wickersham, Principal,

Westtown Boarding School,

Westtown, Pa.

Dear Sir:—

We thank you for your letter of January fifth and are very glad indeed that you are so heartily in sympathy with the work of this Department. It was entirely proper to call our attention to the possibilities of there being cases of sore throat or tonsillitis which may not have been scarlet fever among the others who were taken ill. However, the fact that no diagnosis was actually made in their cases and that our conference occurred at such time when it was impossible to have a diagnosis made clear, leads us to believe that we were right in treating them all on the basis of the diagnosis of scarlet fever.

Very truly yours,

(Signed) SAMUEL G. DIXON,

Commissioner of Health."

ABSTRACTS OF REPORTS OF COUNTY MEDICAL INSPECTORS.

ADAMS COUNTY.

Abstracts from Reports of Investigations of Alleged cases of Communicable Diseases During the Year 1911.

Dr. J. R. Dickson, C. M. I. During the year 1911 two hundred and thirty-nine cases of reportable diseases were recorded by me for Adams County, returned by the nine District Health Officers. One hundred and two of these were of the form of contagious generally considered of special danger to life, and demanding extra action on the part of Health Officials where prepared foods and dairy products are sold from the infected premises, these four diseases being Typhoid Fever, Diphtheria, Scarlet Fever and Small Pox.

TYPHOID FEVER.

Sixty-seven cases were typhoid fever, a large proportion being in families engaged in producing milk and butter on farms.

During June this disease spread to a great extent in New Oxford Borough and the townships adjacent to it, traceable to the use of ice-cream manufactured in that borough, and sold to restaurants, picnic promoters and families. This ice cream factory obtained its milk from nearby farms and from a milk station in the borough to which milk had been delivered for weeks from a typhoid fever infected farm house. Numerous cases in different townships developed at points distant from New Oxford having no connection with that outbreak.

July 7, the Health Officer, notified me of a case near Idaville, Tyrone Township, a mountain village in the extreme north end of the county. I visited the premises, a dairy farm, and found the householder ill with typhoid fever. Date of onset June 30. During these eight intervening days dairy products had been sold from the premises. The infection had probably existed two weeks, as date of diagnosis and date of onset are sometimes made to coincide, when date of onset usually precedes date of diagnosis a week or more.

The wife of patient was nurse and cook and did the milking. No source of the disease was discovered. The sale of dairy products was stopped; the herd being small, the expense required to observe the Department's regulations permitting their sale, being too great in proportion to their value.

There was no violation of the order stopping the sale of dairy products in this case, though it was a heart breaking order. The payment of family expenses and of labor for the harvest depending

upon the income from the herd, and whilst the reasons for observing the regulations as to excreta disposal, and disinfection of sick room and person were apparent, and willingness expressed to observe these regulations, protection to the public ceased to be an argument in the face of loss of income from sale of milk and butter.

July 29, the Health Officer reported five cases of typhoid fever in a family in Cumberland Township. Milk being sold from this farm, I visited the premises, which bordered the borough of Gettysburg and stopped further sale. The cases were all children under ten years of age, nursed by Miss S., a graduate nurse. The well, close to the house, came under suspicion in the absence of any other probable source of origin. A quantity of milk had fallen into this well, and the family washing had been done on the well floor. A child of a neighbor, and a young adult from another more distant family, took ill with typhoid fever on August 5th and 12th respectively. Both had visited this home about date of development of the infection therein. The well was thoroughly cleaned, quick lime freely used in it and on the walls, and use of water discontinued. All of these seven cases recovered. The Department's regulations had been faithfully observed.

DIPHTHERIA.

Thirteen cases were diphtheria, and in all of them placarding and quarantine were not opposed, instructions given as to care of sick room well received, and prohibition of sale of dairy products readily complied with. Our physicians were mostly prompt in the use of Antidiphtheretic Serum, though occasionally, after diagnosis, delay is met with while waiting for severe symptoms. Parents too, sometimes, doubt the necessity for its use in cases not severe, both these facts showing an old idea that Antitoxin is a last resort in diphtheria. The following case illustrates a form of prohibition of the sale of dairy products not due to the "good offices" of the County Medical Inspector.

July 2, R. W., minor son of R. W., of Highland Township, visited my office with an extensive diphtheria of the mouth and throat, swollen glands, and severe constitutional symptoms. A full dose of antitoxin was given. He then was taken home. The dairy farm on which the father resided had on it two furnished dwellings, the one used by the grand-father, the other by the W. family. The patient was taken to the house of the grand-father, nursed by him, and quarantined. The W. house where the infection was started was disinfected, the family taking disinfecting baths. The sale of milk and butter was then permitted. Thirty pounds of fine butter had been sold weekly to private families. Each family declined to receive the butter during quarantine, and milk stations refused the milk. Its sale was effectually stopped and it was fed to hogs.

SCARLET FEVER.

Eighteen cases of scarlet fever were reported, no deaths. Sale of milk and butter was stopped on dairy farms where several of these cases existed. All were mild cases and no alarm was shown by parents over possible sequelae, and none developed to my knowledge. I saw one family of children in the stage of fading eruption and desquamation playing in the woods, with no bad results to them.

SMALLPOX.

Four cases of smallpox were reported to me by Associate Chief Medical Inspector, Dr. C. J. Hunt of the State Department of Health, as existing in a family in Hamiltonban Township adjacent to the Franklin County line in Tar town. Under instructions I visited these infected premises twice a week for thirty days to observe contacts, and to determine date of disinfection and release from quarantine, which date was July 8th.

Some of the difficulties met with in disinfecting the persons and dwellings of the poor are illustrated in this W. family, the house has two rooms, one on the ground floor. A tent of poles and sheets was placed over an open window downstairs, and in it were placed clean clothing contributed by neighbors for both males and females, seven in all. The men took their disinfecting bath on the lower floor, leaving their former clothing in the room for disinfection, and from the tent as a dressing room they emerged in clean clothing, and went to the shade trees on the premises. The women then came to the lower floor and did likewise, and then joined the men where they ate a lunch provided for them and spent the rest of the day outside, while formaldehyde disinfection of the house was in progress. The thermometer was above 90 degrees. No such facility of action would be possible in a snow with zero temperature. The erection of a temporary shed or tent, well heated would then become a necessity to protect the health of such unfortunate people.

CHICKENPOX, WHOOPING COUGH, MUMPS, MEASLES.

Of these minor contagions there were respectively forty-seven (47), forty-five (45), twelve (12), and four (4) cases reported.

These diseases are the source of some trouble in management. A physician is seldom employed and their discovery by Health Officers not readily made. They are often not discovered. Parents resent school exclusion, and some teachers are slow to suggest it. The schools are "free schools" where all children of school age are free to enter. The fact that a pupil must qualify to attend school, and that infection by disease, disqualifies, is often ignored. Placarding, quarantine and ultimate disinfection are disagreeable and not done at all alike. Hence the trouble. There is a prevalent belief, time honored, that these

four diseases should be contracted in childhood, when they are harmless. Based on this belief the following action was taken by a householder to shorten his quarantine and secure earlier re-admission to school. December 4 J. H. of Cumberland Township, was reported as having one child of school age infected with chickenpox. There were four other children.

Knowing that quarantine would not expire until twenty-one days after date of onset in the last case, all were put together in one bed. Prompt development of the disease resulted in all.

MISCELLANEOUS.

Of reportable diseases not requiring quarantine there were ten of tuberculosis, sixteen of pneumonia, and one of puerperal fever. Physicians do not regularly specify the forms of tuberculosis or pneumonia.

Statistical Summary of Work Done During the Year.

Forms 34 received,	279	
Forms 36 received,	163	
Forms 37 received,	154	
Examined cases alleged to be		Dairy farms inspected for
Variola,	5	Typhoid fever, 16
Typhoid fever,	3	Diphtheria, 2
Diphtheria,	1	Scarlet fever, 3
Scarlet fever,	4	
Varicella,	14	Sale of milk stopped at 18 premises.

ALLEGHENY COUNTY.

Abstracts from Reports of Investigations of Communicable Diseases During the Year 1911.

SMALLPOX.

Dr. S. M. Rinehart, C. M. I. Jan. 13, Dr. Adolph Koenig, Acting County Medical Inspector during my absence in Europe, inspected a case of suspected smallpox in Carrick and confirmed the diagnosis. Quarantine was established and vaccination of all contacts.

February 24, Dr. Koenig diagnosed a case at Blair, Baldwin Township, two families occupying the house in which the case was discovered. All contacts were vaccinated successfully since childhood.

August 3, visited a case of suspected smallpox in Stowe Township, which proved to be chickenpox.

SCARLET FEVER.

February 18, Dr. Koenig investigated five cases of scarlet fever in the family of the Postmaster of Camden, Mifflin Township. Com-

plaint had been made concerning the possibility of contagion, owing to the occupation of the father of the children. The Postmaster was instructed to have the children removed and the premises disinfected and the postoffice opened.

INFANTILE PARALYSIS.

January 16, Dr. Koenig visited a case near Perrysville with Dr. H. and determined that the disease was not acute poliomyelitis anterior, but probably of Lentic origin.

Statistical Summary of Work Performed During the Year.

Forms 36 received,	835	Scarlet fever,	5
Forms 37 received,	500	Varicella,	1
Examined cases alleged to be		Schools ordered closed,	1
Variola,	2	Drainage complaints investigated, .	1

ARMSTRONG COUNTY.

Abstracts from Reports of Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

Dr. T. M. McKee, C. M. I. This summary of work done for the year will be largely statistical with only such brief comment as may be necessary to make the same clear.

This county has an area of 624 square miles and is divided into one city, 16 boroughs and 27 townships. According to the enumeration made last year the county has a population of 67,881. The city and boroughs contain 27,075 leaving a township population of 40,806, which has to do with this report, and an area somewhat in excess of 600 square miles coming under the direct supervision of the County Medical Inspector.

During the year, 851 reports of placarding for communicable diseases (form 36) were received from the eleven district Health Officers in the county, as against 1,430 in 1910. These officials also sent in 802 reports of disinfection (form 37). All these reports were carefully examined, and if incomplete, or additional information desired, they were returned to the proper Health Officer before being entered on the records of this office.

Of the 32 reportable diseases this office had to do with but 12 during the year, as follows:

CEREBRO SPINAL MENINGITIS.

But three cases of this disease were reported during the year,—one from Pine Township, in September and two from Madison Township during December. Both the latter cases were in the same family. All were under the care of physicians and required no action on the part of the County Medical Inspector.

CHICKENPOX.

Seventy-nine cases of this disease were reported by physicians and householders during the year, every month being represented, and ranging in number from one in August to sixteen in April. The disease appeared in ten townships, the greatest number of cases 48, being reported from Brady's Bend.

During the year it was found necessary to visit three townships, viz: Brady's Bend, Sugarcreek and Pine, for the purpose of establishing the diagnosis and getting outbreaks under control. Compared with last year there was a reduction of 20 per cent. in the number of cases reported.

DIPHTHERIA.

This disease appeared in 18 townships during the year. A total of 107 cases being reported. East Franklin heading the list with twenty-two; eleven of these, however, being in one family; and Brady's Bend second with 18 cases, eight of these were found in one family by the County Medical Inspector. In order to establish the diagnosis and inaugurate measures for checking the spread of the disease, it was found necessary to visit two townships and order two school rooms closed and fumigated.

Reports of the disease were received every month of the year except April, and vary in number from one in May to thirty in November. This is an increase of 60 per cent. over last year, due largely to unrecognized cases in East Franklin and Brady's Bend Townships.

ERYSIPELAS.

Six cases of erysipelas were reported; two in May and one each in January, February, November and December. The cases were widely separated geographically, and apparently bear no relation to each other. All were properly placarded and the premises subsequently fumigated by the respective Health Officers of the districts and required no special investigation by this office.

MEASLES.

The county was peculiarly free from measles throughout the year, only 41 cases being reported, and 28 of these were from Red Bank Township. During the latter part of August and early in September, 13 cases developed in the southeastern part of the township, which, on investigation, proved to be an extension of an outbreak of the disease in Porter Township, Jefferson County. With the enforcement of strict quarantine regulations the disease was kept within the families infected at the time of our visit, August 31st. Fifteen cases developed along the northern border of the township in the latter part of November and December. The initial case in each

household was infected while attending public or Sunday school in the borough of Hawthorn, Clarion County. Proper precautions of quarantine regulations confined the disease to the families thus infected.

Four imported cases were found in South Buffalo Township October 1st. The effectiveness of the prescribed method of handling this disease was again proven by the fact that not another case developed in that community. The nine remaining cases were distributed in five townships and five months. This is a reduction of 93 per cent. over 1910, in the number of cases reported.

MUMPS.

Mumps were reported from thirteen townships, and in every month of the year with the exception of September. A total of 225 cases reported by physicians and householders, being an increase of more than 100 per cent. over 1910. It was necessary to visit four townships during the year for the purpose of establishing the diagnosis and enforcing quarantine regulations.

PNEUMONIA.

Nine cases of pneumonia were reported during the year. One in January, two in February, two in March and four in May. Four were reported from Bethel Township and one each from Brady's Bend, Cowanshannock, East Franklin, Manor and South Buffalo. None of these, of course, required any action on the part of the County Medical Inspector.

SCARLET FEVER.

Scarlet fever developed in seventeen townships and in every month of the year but August, a total of 65 cases being reported. This is a reduction of 56.4 per cent. compared with 1910. Two townships were visited during the year on account of this disease; East Franklin January 2nd for the purpose of establishing the diagnosis, and Burrell November 21st for the purpose of controlling an outbreak in the Wagle school district. After investigation it was found necessary to have this school closed and the room fumigated. This, with other precautionary measures inaugurated, prevented further spread of the disease in this district.

TETANUS.

Only one case of tetanus was reported during the year. It developed in South Buffalo Township in January, and required no action on the part of the County Medical Inspector.

TYPHOID FEVER.

Typhoid fever was reported from 22 of the 27 townships in the county, and in every month of the year, the greatest number being in October and November, when 16 and 15 cases respectively, were reported. The total number 95 cases, shows a decline of slightly over 40 per cent. over last year. A number of these cases can be classed as important, i. e., persons employed in manufacturing centers becoming ill returned to their homes in the country and there, went through a course of typhoid fever.

It has been the custom to make special inquiry when a case of typhoid fever was reported. Both as to the probable source of infection and local sanitary conditions. As a rule I have found householders very willing to accept suggestions for the correction of suspicious sanitary conditions when found, and faithful in carrying out instructions given for the protection of others, not only of their own household but for the public at large as well.

WHOOPIING COUGH.

One hundred and ninety-one cases of this disease were reported by physicians and householders from 16 townships, and in every month of the year but May. Compared with 1910, there was a decrease of 17 per cent.

The eleven District Health Officers of the county have been uniformly prompt and careful in the discharge of their duties. It is gratifying to note that not a single complaint in regard to their action has reached this office during the year.

The increasing frequency with which your County Medical Inspector has been consulted by Health Boards, School Boards, Teachers, Physicians, business men and citizens generally, in reference to health and sanitary matters, shows in a practical manner appreciation of the efforts of the Department in safeguarding the public health, and is a source of distinct pleasure to your representative. I cannot close this report without calling attention to the splendid support given me by the physicians of the county in various ways. It is my privilege to know every physician in the county personally, and it has been my custom when visiting the various sections of the county to call on the physicians if possible and go over health and sanitary conditions in their respective districts with them to our mutual advantage.

Statistical Summary of Work Performed During the Year.

Forms 34 received,	956	Diphtheria,	52
Forms 36 received,	565	Scarlet fever,	23
Forms 37 received,	457	Varicella,	52
Cases examined alleged to be		Pertussis,	115
Typhoid fever,	97	Measles,	59

BERKS COUNTY.

Abstracts from Reports of Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

Dr. Israel Clever, C. M. I. There was no prevalency of any communicable disease in this district during the year 1911, and hence report will consist of a few localized outbreaks and interesting features of some sporadic cases.

DIPHTHERIA.

During the last week of January, 1910, two members of the school board of Carnarvon Township made a personal call regarding outbreak of diphtheria in their school district near Morgantown, and desiring action in the matter. They further stated that increase in the number, they feared was due to many cases of alleged tonsilitis in families without a physician, as well as where physicians were employed, but which were probably diphtheria. One family visited by me will serve as a good illustration. Said family consists of nine children besides the parents. On or about December 11, two of them were taken ill with sore throat which the father said he believed to be simple tonsilitis and required no physician. For a third case a physician was called who diagnosed it diphtheria and examining the two previous cases declared that one of them at least had been undoubtedly affected with the same disease. The third case died a few days after my visit. Six other cases of affected throat occurred after the third, but which the same physician pronounced follicular tonsilitis. Another physician whom I met on the trip, confirmed the report of numerous cases of tonsilitis unattended by any physician in this locality, and some diphtheretic cases of his personal knowledge that were reported. He believed that contact came from the district of Lancaster County just beyond the border line of Berks in this vicinity which was said to be equally affected. It was impossible for me to secure the names of any cases of diphtheria unattended by physician. The school directors were sufficiently alarmed to cause disinfection of their school houses. On this occasion I also visited with the attending physician a family in whom a number of parties said the disease first appeared. The onset of illness had taken place about four weeks previous. I found no objective or subjective symptoms of diphtheria or tonsilitis and from the detail given me by the family I believe the disease was quinsy, the patient having had several such previous attacks. The physician who attended the case, said the patient suffered from disease of the left frontal sinus before the quinsy of which no traces were evident at the time of my visit. Upon

reporting conditions to Commissioner Samuel G. Dixon, I was instructed to visit this community and examine every case of sore throat I could find. This numbered about a half dozen in none of which were sufficient signs or symptoms to warrant a positive diagnosis of diphtheria. Most of them however, agreed to disinfection of their premises. It may be noted that a majority of these families belonged to a religious sect called the Amish among whom is a strong belief in the duty of visiting each other during illness, and it is probably that this carrying out of their creed accounted for the spread of both tonsillitis and diphtheria. Many of them professed to believe the work of the Department not necessary because the affliction was a visitation of Providence, as they believed. However, after a few deaths and severe illness in a large number they felt less inclined to protest against the work of our Health Officers.

April 13, I made a visit to a family in Earl Township, in which there was said to be a case of measles and one of diphtheria unreported. About ten days previously, a physician had been called in to see one of these patients whom he diagnosed as having "sore throat from cold" and left saying another visit was not necessary. Several days afterwards, another child was taken ill, the mother recognizing the disease as measles. This family was to have moved on a certain day but was prevented because of the illness of the two children. They vacated a portion of the house to make room for another family engaged to take their place after removal. Several days later, one of this second family was taken ill and a physician being called in, pronounced the disease diphtheria. She was still nursing a 15 months old infant. I confirmed the opinion of this physician both for the diphtheria and measles. Both these cases are marked examples of the dire results of no medical opinion at the commencement of such diseases as well as blameworthy errors on the part of attending physicians.

MEASLES.

June 6, the Health Officer reported a family in Colebrookdale Township with alleged measles and no attending physician. I found six subjects whom I could check off as positive cases. The mother of this family charged contact, to the school in the near village, stating that the teacher had the disease in his family and continued his duties during the whole illness at home. Visiting said school, the teacher admitted that some of his children had suffered from some skin eruption but were not ill, and he did not know whether it was measles or not. The Health Officer said, he had sent cards for the above family of six cases but understood the teacher had admitted two of them to his school. This I found to be correct, and had them sent home immediately, through claiming to be immune by an attack two years previous. The teacher excused his action

on the ground that he had no documentary instructions of the Department rules but did not know how to explain his ignoring the Health Officer's card No. 42. Another family in same village having two cases, charged contact to a next door neighbor, where measles existed and were duly reported, but was visited by her children before the physician's diagnosis was made. This is a fair illustration of how such diseases are often, and I believe mainly distributed.

CHICKENPOX.

January 16, I made a visit of investigation of alleged chickenpox, reported by the Health Officer of Spring Township. The progress of the disease seems to have been as follows: The teacher of the Conrad Weiser school noticed an eruption on two pupils and sent them home. She thought the disease must have existed several days earlier as the eruption was on the wane when noticed and she professed familiarity with the appearance of chickenpox. The same day she noticed the same kind of skin eruption in the children of two other families, attending the school, and sent them home also. A total of eight in all. Another family had one case but hearing of my expected visit a physician was called in and reported as a positive case. Four other pupils of this school had been previously reported by physicians. While having doubt as to the observance of quarantine in these cases, it is certain that those not under medical care, lived regardless of our rules. The first family seems to have contracted the disease from a person in Wernersville, whom we learned had chickenpox on the premises. The results of lack of isolation and quarantine were conspicuous in these cases. I ordered disinfection of the school house in accordance with Department rules and a popular sentiment seeming to demand it, though my personal belief in its utility is almost nil. in comparison with isolation and quarantine.

A similar outbreak occurred in connection with the Palm School, Oley Township, to which I made a visit March 9th. These were all alleged cases, which I diagnosed as positive. I found two members of one family in the school with the eruption visible, and a third immune by reason of a previous attack. Other cases were afterward reported by physicians. Here as in the above instances, lack of isolation and quarantine showed its ill results.

SCARLET FEVER.

These cases are presented to show some of the difficulties encountered by Health Officer, rather than scientific findings in the case. A householder in Center Township had submitted to placarding and quarantine under protest. When visiting the place relative to the proper handling of dairy products, I found the placard gone. The

mistress declared she knew nothing about it. A second placard was placed and the householder's responsibility emphasized. The mother seemed anxious for argument but was easily "switched off." When the quarantine period had elapsed the Health Officer expressed fear of bodily harm if he attempted the work, threats of this being made on his first visit.

Upon instructions from the Commissioner's office, I accompanied the Health Officer. Was met by the mother who said she did not object to disinfection, but, did not think it could be done then on account of the frail condition of her mother, aged above 90 years and occupying an upstairs room. Without any objection I was allowed to see the old lady who certainly was too decrepid to move from her room to another. I said I would disinfect the other rooms without harming her mother, agreeing to remain with her until the work was finished, and use a different process in her apartment. This called forth some scolding and the mother went down stairs. When I attempted to enter the old lady's room I found it locked. Suspecting a trick, I tried the door at the foot of the stairway and found it locked and my Health Officer and myself penned in. Fortunately the formaldehyde mixture had not been started. The Health Officer made exit over the roof of an annex and down a tree, and found the lady busy and refusing to open the stair door which however, was forced. Hoping to accomplish our purpose without physical action against the woman, quarantine was continued and report made to the Commissioner. A letter from the Department seemed to bring the party to terms and disinfection subsequently performed without any resistance.

Under instruction of Dr. Dixon, I accompanied the Health Officer of Windsor Township to where resistance had been made to his work, and the placard for scarlet fever removed twice. The householder came, leading a horse to his barn, as we came to the premises. He refused to speak to me and I followed him to the gate entrance to his barnyard. He then advised me to clear the way, as he had "no time for me" and was going to his work. He walked rapidly toward me but found the gate wide enough to pass me without my having to change my position. Picking up a hand cultivator he behaved as though he would run into me with it, but avoided it without obliging me to change my position and disappeared behind the barn. By this time his wife appeared and threatened to douse me with a pail of water hanging on her arm. Assuring her I was fond of water I instructed the Health Officer to replace the placard. I secured a guard over the premises, and when finally promise was given of obedience the guard was discharged. Quarantine however, was violated repeatedly and after perplexing troubles in disinfecting two houses between which the family varied residence, prosecution

was brought. The householder preferred going to jail to furnishing bail for appearance before a magistrate. Two days confinement changed his feelings when he appeared for trial, pleaded guilty, also for mercy and was released after paying costs amounting to above fifty dollars.

Statistical Summary of Work Done During the Year.

Forms 34 received,	1144	Varicella,	10
Forms 36 received,	727	Measles,	8
Forms 37 received,	755		
Cases examined alleged to be		Dairy farms inspected for	
Variola,	1	Typhoid fever,	16
Typhoid fever,	8	Diphtheria,	22
Diphtheria,	8	Scarlet fever,	27
Scarlet fever,	11	Stock transferred on 9 premises.	
		Sale of milk stopped at 8 premises.	

BEDFORD COUNTY.

Abstracts from Reports of Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

Dr. W. de la M. Hill, C. M. I. During the month of January it was reported to me that there was a family living in Broad Top Township near Coaldale Borough in which it was suspected that scarlet fever was present. I made an inspection of the premises and found three cases of the disease. I notified the Health Officer and the house was placarded. No more cases developed in the community.

A number of cases of typhoid fever developed in the borough of Bedford during the month of August and in accordance with instructions from the Department of Health I made an inspection of the condition of the water supply. I found the three reservoirs which supply the town in excellent sanitary condition. The majority of the cases developed after having returned from visiting away from home. I could not assign a cause for the few cases who had been in the borough constantly.

In November an epidemic of chickenpox developed in Snake Spring Township arising in the family of Geo. Miller and spreading through the Mt. Spruce school. There were at least twenty cases which we could find but there were numberless others which it was impossible to get owing to the concealing of the disease. I made an inspection and ordered the school closed, for ten days and thoroughly fumigated.

Three cases of chickenpox developed in Broad Top Township about this time and after making an inspection and having the houses placarded, the disease was checked before spreading.

During the month of November chickenpox broke out in a family in Snake Twp. and almost at the same time his cattle became afflicted with an eruption on their udders and other parts of their

bodies, similar to cow-pox. I made an inspection of conditions and after getting scabs and pus from the children afflicted with the chickenpox and notifying the Department, a representative was sent to examine the cattle. No further cases developed among the cattle in the community and after a period of quarantine and a thorough fumigation the sale of milk and butter was continued.

During the month of December, some suspected cases of Diphtheria were reported to me from South Woodbury Twp. On inspection I found there had been four cases in one family with one death, this death had been certified to, as having been caused by pneumonia, but on getting the history of the case I decided that the death had been caused by Laryngeal diphtheria. This was the first case in the family, the others followed afterward. There having been a public funeral, three more cases developed in the community with another death. I notified the Health officer who took the necessary precautions to prevent the spread of the disease, ordered the school in that district closed until it was thoroughly fumigated. No further cases developed.

Statistical Summary of Work Done During the Year.

Forms 34 received,	253	Cases examined alleged to be	
Forms 36 received,	196	Diphtheria,	4
Forms 37 received,	199	Varicella,	5
		Measles,	5

BEAVER COUNTY.

Abstracts from Reports of Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

Dr. Bruce Snodgrass, C. M. I. Upon receipt of advice from the Health officer that chickenpox existed at a home in Hopewell Twp., no physician being in attendance upon the case, I instructed him to forward the card signed by the householder to me, after quarantining the house. I made investigation December 15, and confirmed the diagnosis of chickenpox. While there I heard that there had been several cases a month before and judged it wise to order the schools closed and fumigated.

Upon receipt of advice from the Health officer that mumps was prevalent in Sewickley Twp. and that many cases were unreported to him due to the fact that no doctor had been called, I instructed him to investigate and if unreported cases were found, to have the householder sign the card, placard the house, and forward the cards to

me. He located several cases. Made personal investigation December 20, inspected seven cases in four families and confirmed the diagnosis of mumps in each case. One case, a man of middle age was out chopping wood when I called. I explained to him fully the serious nature of his disease and the necessity for taking care of himself, but could not persuade him that there was any danger. However, he "caught cold" and was confined to his bed for several weeks, thus convincing himself and his neighbors that mumps is a serious disease and should certainly be quarantined and prevented from spreading.

BOROUGH EPIDEMICS.

Following the outbreak of typhoid fever in the borough of New Brighton in 1910 it was necessary to make a census of the cases in January 1911, and on January 4, Dr. C. J. Hunt of this Department came out for that purpose. I accompanied him at his request. 24 cases occurring since September 1, 1910 were tabulated and a meeting held with the local Board of Health for the purpose of discussing quarantine regulations and Board of Health work generally.

When Dr. Hunt was at New Brighton I mentioned to him that we were receiving practically no reports of communicable disease from physicians practicing in various parts of the county, notably Darlington Twp. He instructed me to make an investigation. This was done January 6, with the result that three unreported cases of typhoid fever were diagnosed, one in Darlington Borough and two in Darlington Twp. Letters were sent by the Department to the delinquent physicians and the result has been very satisfactory. Upon receipt of instructions from the Department to visit the milk depot of C. W. V. in New Brighton and two dairy farms in Daugherty Twp. and to secure a list of his milk customers for the Department, I performed that service January 17. The outbreak of typhoid fever in New Brighton in September and December had been traced to the dairy farm of W. B. where several cases existed unreported, and from this visit I learned that a milk can had been brought from the dairy farm of W. B. to that of T. I. several cases then developing at the latter place.

In this section of the county we continually met with opposition on the part of those quarantined and their neighbors as well, who were in the dairy farm business. It required considerable time and care to explain and to insist upon compliance with the regulations of the Department without using drastic means. A good part of this opposition I attributed to the physicians who practiced among these people, in not only not giving them reliable information along the lines of prevention of disease, but in actually encouraging them in the belief that they were being imposed upon. Upon receipt of

instructions from the Department May 4, I investigated a case of anterior poliomyelitis in the borough of Beaver Falls. I found however, that the child had been dead and buried several days, and as the people were Italians and not able to talk or understand English I received little information.

STREAM POLLUTION.

Upon receipt of complaints from persons living in the neighborhood, that a premises in Darlington Twp. was in a very unsanitary condition and in danger of polluting a stream, I secured permission from the Department to make an investigation. There are three tenement houses on the premises which is near the borough of Enon and the privies were placed over a small stream.

DAIRY FARMS INSPECTED FOR TYPHOID FEVER.

In addition to the three dairy farms in Daugherty Twp. which are more properly included I believe, under the head of Borough epidemics, for the reason that these inspections were in a sense incidental to the investigations of the outbreak of typhoid fever in the borough of New Brighton. March 10, upon receipt of a card from reporting typhoid fever on a dairy farm in N. Sewickley Twp., milk being sold from the premises, I inspected the place May 10, and found that the patient, who had only been sick four or five days, had fully recovered. In this case the attending physician had, very properly, given the public the benefit of the doubt in the diagnosis.

On October 4, upon receipt of cards reporting typhoid fever at two dairy farms in Daugherty Twp. and that milk was sold from the premises I inspected the farms October 4 and stopped the sale of milk, October 10. They had the idea that the sale of infected milk or butter should not be interfered with, and that the Department of Health had no authority to enforce its rules. They admitted the strong probability of the milk and butter being infected since the wife, both attended the sick and took care of the milk, but refused to stay the sale of it, defying the Department of Health and everything connected with it, and stating that it was none of our business if they infected a whole town or community. The attending physician happened to be making his daily visit at the time, and I could plainly see that the opposition was based largely upon his opinion and his attitude toward health laws. I reported the case to the Department October 10, and received in reply a telegram from Dr. Royer instructing me to place the premises under absolute quarantine with a guard day and night. This was done forthwith, and it is a notable fact that we have met with no more opposition in that section.

October 8, upon receipt of advice from the Health Officer that there were some unreported cases of typhoid fever in Moon Twp., I reported to the Department and received instructions to investi-

gate. Made an investigation October 11 with the Health Officer and found ten cases, one at the dairy farm of J. A. P. the other at the dairy farm of C. B., milk being sold from each. The rulings of the Department were explained, the house quarantined, and sale of milk stopped.

Upon receipt of card notice reporting a case of typhoid fever on a dairy farm in Green Twp. where milk was being sold, I made an investigation November 26. The householder readily agreed to stay the sale of milk and expressed himself as being glad to avoid any possibility of spreading the infection.

COMMENT.

Our branch of this work being very largely in rural districts the whole subject of prevention of disease seems to have been new, I cannot but regard the educational work done as considerable, more or less opposition was the rule in the beginning of the year, but it gradually gave way as education on the subject increased. Our aim has been to deal fairly, explaining fully, and giving reasons in such a way as to avoid misunderstandings, to secure compliance without giving offense.

Statistical Summary of Work Done During the Year.

Forms 34 received,	123	Eight dairy farms inspected for typhoid fever. Sale of milk stopped at two premises.
Forms 36 received,	100	
Forms 37 received,	84	

BLAIR COUNTY.

Abstracts from Reports of Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

TYPHOID FEVER.

Dr. J. D. Findley, C. M. I. April 11th, I was requested to inspect the premises and have an examination made of the water supply on a farm on account of there having been three cases of typhoid fever there in the past year. I found that almost everyone that had lived on this farm for thirty years had had typhoid fever. I advised change of the water supply.

June 22nd, I inspected a farm where milk products were sold and where a case of typhoid fever was reported. It was arranged to have the milk handled by persons from an adjoining place.

September 3, a case of typhoid fever was reported from a farm where milk was sold. On inspection it was arranged for part of the family to live away from home and handle the milk.

October 31, In reply to your request I went to a dairy farm south of Martinsburg and investigated with reference to typhoid fever, which then existed there, but found conditions very good.

November 15, Being informed that the Health Officership of Huston Twp. was vacant I placarded a house for typhoid fever and employed the usual precautions to prevent infecting the remainder of the family.

VARIOLA.

August 23d, I was called to a hospital to see a case supposed to be smallpox. In my judgment, which time confirmed, it was not smallpox but syphilis. The patient, an Italian woman, came from a construction camp at the new Altoona reservoir. August 25th, I went to this construction camp but found no other suspicious cases.

Statistical Summary of Work Done During the Year.

Forms 34 received,	102
Forms 36 received,	102
Forms 37 received,	96

BRADFORD COUNTY.

Abstracts from Reports of Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

TYPHOID FEVER.

Dr. T. Ben Johnson, August 26, I received report from the Health Officer in Burlington Twp. reporting typhoid fever in a home, where I went and found conditions very good and patients at both homes were removed to the hospital. No placard used, as partial disinfection had been performed by the Health Officer. September 2, received a report from the Health Officer in Towanda Twp. concerning two cases of typhoid fever at a home where conditions were deplorable and the water supply bad. September 4, I visited the home and insisted upon boiling the water for use; I found the existence of previous cases probably 18 months before. There were three water supplies on the premises, and for the examination of these, wrote for containers which were received; specimens were sent which showed numerous bacteria; no baccillus coli and not typhoid bacillus. October 5, received a report from Health Officer of New Albany Twp. concerning typhoid fever at a farm. I made the trip, found conditions good and no dairy at the time; meat supply of Overton butcher was inspected but found to be only in fair condition. Recommendations for improvements

made and no further cases developed. October 16, a report from Health Officer in Canton Twp. concerning typhoid in the home of Rev. P. but could not diagnose same; water at Mrs. C.'s was extremely bad while water at Rev. P.'s not good and also dairy report of this case. The dairy was cared for by father and he lived elsewhere and did not come in contact with the disease. Inspected two dairy farms all told, in Wyalusing Twp., one in Gillett Twp., one in Overton Twp., also one each in Pike, Canton and Smithfield Twps. Ordered precautions taken where necessary, but in nearly every case conditions were such as to prevent rapid spread of the disease.

DIPHTHERIA.

June 27, received a report from the Health Officer at Burlington and visited the home of Mr. M. where a case of diphtheria was existing and milk was sent to a creamery up until the diagnosis of the case. I went over the ground carefully and found things isolated and milk not going into the house in any manner. I authorized him to proceed with his milk if he did not in any way come in contact with the disease. Instructions were carried out to the letter and no more cases reported in this district during the year.

SCARLET FEVER.

April 7, received information by letter from the Health Officer at Wyalusing concerning scarlet fever. While on a trip through this section I visited a home where scarlatina was supposed to have existed sometime previously; owing to a lapse of time, was unable to check the diagnosis, so was unable to leave any instructions or to make any further procedure. May 26, I again went to Wyalusing on report of the Health Officer, but as convalescence was nearly or quite established, a diagnosis of scarlatina was difficult. I left instructions at several homes and no further cases developed. I inspected a dairy farm at Standing Stone on May 15, and also one in Pike Twp. July 16, and established the usual dairy restrictions.

VARICELLA OR CHICKENPOX.

May 22, having received the previous day, a report of chickenpox from the Health Officer in Rome Twp. I visited the homes where the disease existed with the Health Officer and was able to check five cases which had been unattended by a physician and which were fairly well along to a convalescence. Usual quarantine established and usual restrictions made. No further developments and no more cases reported. November 19, received a report from the Health Officer in Granville and Smithfield Twps. that chickenpox existed and in company with the Health Officer checked these cases and

ordered schools closed and fumigated. No further cases reported after these had been properly placarded and proper restrictions made.

MEASLES.

To report on measles of the year 1911 is practically an impossible task as during the year there has been an epidemic of this disease throughout the greater portion of the county and most of the work has been simply looking up cases of the disease and checking the Health Officers' diagnosis.

Cases reported by the Health Officers:

March 28, measles 1, Towanda Township.
April 11, measles 3, Wyalusing Township.
April 15, measles 18, Wilmot Township and Wyalusing.
April 21, measles 3, Terry Township.
April 25, measles 4, Towanda Township.
April 26, measles 2, Smithfield Township.
April 29, measles 5, Wyalusing Township.
May 9, measles 4, North Towanda Township.
May 10, measles 3, North Towanda Township.

One child died in this household of pneumonia following the disease. Two physicians being in attendance and no report having been sent in. I made proper restrictions and ordered a private funeral.

May 16, measles 7, Sheshequin Township.
May 19, measles 3, Wyalusing Township.
Also suspected scarlet fever but was unable to check same, but think case was probably one of measles which the usual measles action followed.
May 22, measles 10, Troy Township.
May 29, measles 6, Sheshequin Township.
June 9, measles 1, North Towanda Township.
June 30, measles 4, Wyalusing Township and Wyalusing.
July 2, measles 1, Leraysville and Warren Center; other cases examined; diagnosis not positive, no action taken.
July 7, measles 4, Burlington and West Burlington Township.
July 18, measles 9, in Asylum, Windham and Orwell Townships.

Each inspection on above mentioned was made a day or two following receipt of the Health Officer's report.

WHOOPIING COUGH.

May 7, I went through Rome Twp. and checked twelve cases of whooping cough. These people would not sign the card so was forced to make this trip. May 27 while making an inspection trip through Wyalusing Twp., I checked one case of whooping cough, report having been made to the Health Officer that the disease existed.

COMMENT.

In presenting the foregoing brief summary of work done by me as County Medical Inspector I would say that taking up the work following the death of the previous incumbent of office, that my task was most arduous, as what I knew about the Department work

I had to learn by hard knocks, getting most of it by actual experience and through the replies to my many and perhaps useless questions and requests for instructions. It has been a great pleasure to follow the reports of communicable diseases which go through my office. Many occasions have arisen in which there have been little differences probably due to the lack of information of physicians in general or to their lack of knowledge of the laws regarding the Department of Health.

The most prevalent diseases we have had to deal with during the year has been measles, and being one of the milder contagious diseases, very often has been treated simply by home remedies, and probably a great many cases have been overlooked, not through any negligence on the part of the Health Officers, but simply for the reason that the cases have never been properly reported. One of the main reasons for non-compliance with rules and regulations in the districts is probably due to the fact, that in boroughs, where a well organized Board of Health exists, the restrictions are not what they should be, and this condition is practically impossible of impression upon the minds of the people, upon whom the absolute restrictions of the various diseases fall.

The work at this time has been and still will be to a great extent, educational in character, and has been aided very materially by all the officers in the Department. The Health Officers have been very efficient in their work and are to be most heartily commended. The County Medical Inspector is called upon from all sections of his territory by letter, by phone and by personal visitations to answer a great many questions relative to the work of the Department and the establishing of quarantine and quarantine regulations. I desire in this report to extend my personal thanks to the Department Officials for their aid in every way, which has been always very much appreciated, and also to our physicians who have almost to a man, given me their hearty support and co-operation as far as they knew about rulings, also to extend my thanks to the Health Officers in this District.

Statistical Summary of Work Done During the Year.

Forms 37 received,	411	Dairies inspected for	
Forms 36 received,	547	Typhoid fever,	7
Forms 34 received,	597	Diphtheria,	1
		Scarlet fever,	2
Examined cases alleged to be			
Typhoid fever,	17	Sale of milk stopped on 1 farm.	
Diphtheria,	1	3 Schools ordered closed, Chickenpox.	
Scarlet fever,	4	28 Health Officers instructed at office.	
Varicella,	14	12 Instructed elsewhere.	
Measles,	90	One polluted spring investigated.	
Pertussis,	13		

BUTLER COUNTY.

Abstracts from Reports of Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

Dr. H. D. Hockenberry, C. M. I. June 19, upon receiving information from the Health Officer regarding unsanitary conditions existing in a suburb of Zelienople, the same being in Jackson Township, made a visit of inspection. As there had been a number of cases of typhoid fever in same vicinity the year previous, it was deemed necessary to correct the conditions, which consisted of obstructions in open sewer, preventing the natural drainage from the houses. I instructed the Health Officer to open drains, and make a report to the Department.

Sept. 7, received notice of two cases of typhoid fever in a home in Jefferson Twp., and as the householder had been shipping milk to Pittsburgh, made a visit to the premises. Notified him to ship no more milk until further notice, which shipment was resumed after the premises had been disinfected.

Oct. 18, owing to an outbreak of typhoid fever in Portersville Boro., received instructions from the Chief Medical Inspector to make a visit of inspection. The doctor whom I deputized to look after this work during my absence, visited the borough of Portersville and made his report to the Department a few days later.

Statistical Summary of Work Done During the Year.

Forms 34 received,	271	One dairy farm inspected for typhoid
Forms 36 received,	196	fever.
Forms 37 received,	186	Sale of milk stopped on a dairy farm.

BUCKS COUNTY.

Abstracts from Reports of Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

TYPHOID FEVER.

Dr. I. Swartz Plymire, C. M. I. January 14, inspected a dairy farm in Bedminster Township, where the proprietor was ill with typhoid fever. There are five cows on the farm and the milk is delivered to the Gulden Creamery. The mother and two others of the family do the milking, take care of cows and

stable, handle the milk and utensils, and eat and sleep in the house, with their mother, who is nursing their father. Arrangements have been made with a neighbor or tenant on the farm to do the milking and take full charge of the dairy and products during the entire period of quarantine. The patient is isolated, the stools, urine, discharges, etc., are being disinfected under the guidance of the attending physician and deposited in a newly dug trench more than 100 feet from the well or any stream, and covered.

Jan. 28, inspected a dairy farm in West Rockhill Twp. where the son is ill. They have eight cows on the farm, and milk is delivered to the Branch Valley Creamery at Moorewood. Arrangements were effected for the householder and W. C. to take full charge of the dairy and eat and sleep in a vacant portion of the double house on the premises. Every precaution is being taken to prevent the spread of the disease.

Jan. 31, inspected the pork butchering establishment of J. F. D. in W. Rockhill Twp. owing to three cases of typhoid fever existing on the premises. The householder kills about five or six hogs each week, manufacturing sausage, scrapple, lard, etc., in the "summer kitchen" of his home, hauls the same together with pork in general and hams, and sells the product at a market in Philadelphia on Thursdays, Fridays and Saturdays of each week. He and his two daughters manufacture the pork products and visit the sick room frequently. The householder during my visit arranged to divide his house, which is practically a double house, as follows: The householder and his two daughters will occupy the portion of the house which is not entered by the nurse or any person who enters the sick rooms, and he and the two daughters will eat, sleep, and prepare their own meals in this part of the house and they alone to continue the manufacture of pork products and handling of the meats for market. The inside door of the "summer kitchen" has been locked. These people are to be assisted in their work by W. S. living and eating about $1\frac{1}{2}$ miles distant. The householder and daughters have promised not to enter the part of the house occupied by the patients and nurse, nor come into direct or indirect contact with anything or persons that has been in the sick rooms. Arrangements have also been completed for the mother of the patients to stay strictly in the portion of the house occupied by the three members of the family ill with typhoid fever and to prepare her own meals and food for the sick in the common kitchen, but which is now being reserved for this purpose. The householder has assured me that these changes will take effect at once, and continue during the entire period of the quarantine. The stools and discharges are being disinfected and deposited in a trench more than 100 feet from the well and any stream, and covered.

Feb. 11, inspected a dairy farm in Hilltown Twp. the daughter being ill on the premises with typhoid fever. There are nine cows on the farm, butter is manufactured and sold at a market in Philadelphia. The men of the household do the milking, take care of the cows and cowstable, handle the milk and milk utensils, manufacture the butter, and eat and sleep in the house where the patient lies ill. Arrangements were made today during my visit to have a neighbor living 1-4 mile distant to take full charge of the dairy and haul the milk to Holley's creamery at Unionville. The householder and his family have agreed to stay strictly away from the cows and cowstable, milk and utensils during the entire period of quarantine. The manufacture of butter will be abandoned during the course of the illness on the premises. The patient is isolated, the stools and discharges are being deposited in a trench more than 100 feet from the well, or any stream, and covered. The mother is nursing.

Feb. 16, inspected a dairy farm in Falls Twp. the mother being ill on the premises with typhoid fever. The householder conducted a small dairy and sold milk at retail in the neighborhood. Since the householder would not protect his dairy products satisfactorily, nor transfer the stock; the sale of milk and any milk products was ordered to discontinue during the entire period of quarantine. The patient is isolated. All excetra are disinfected and buried more than 100 feet from the well or stream.

March 5, inspected a dairy farm in Nockamixon Twp., four children being ill on the premises with typhoid fever. There are nine cows on the farm, and milk is delivered to the Ferndale Creamery. The householder does the milking, takes care of the cows, cowstable, handles the milk and utensils, and sleeps in the house with the patients. Arrangements were affected during my visit to have a neighbor assume full charge of the dairy and products, and the householder assured me that he will stay strictly away from the cows. cowstable, milk and milk utensils. The patients are isolated, stools and discharges are being disinfected and deposited in a trench more than 100 feet from the well or stream, and covered. The mother is nursing.

March 6th, inspected a dairy farm in Hilltown township, the son being ill on the premises with typhoid fever. There are 12 cows on the farm and milk is being delivered to the Blooming Glen Creamery. The father and daughter do the milking, handle the milk utensils and sleep in the house with the patient. Arrangements were made during my visit to have a neighbor take full charge of the dairy and eat and sleep at his own home. The householder has assured me that he and his family will stay strictly away from the cows and

cowstable, milk and utensils during the entire period of quarantine. All proper precautions are being taken to prevent spread of the disease, and the mother is doing the nursing.

March 20, inspected a dairy farm in Milford Twp. owned by a Polish Hebrew, a daughter being ill on the premises with typhoid fever. There were five cows on the farm and the milk was delivered to the Steinsburg Creamery at Steinsburg. Since I found the house and stable in a very unsanitary condition, I ordered the marketing and delivery of milk products discontinued during the entire period of quarantine and until a certificate of disinfection is issued by the Health Officer. The householder is unable to secure a neighbor to do the milking, neither is he able to transfer the cattle, owing to his business reputation. Everything is so filthy about the premises that this householder and dairyman should not at any time be allowed to sell milk for public consumption. The patient is not isolated and the stools and urine are being thrown on the fields. I warned the householder and ordered him to dig a trench about three feet deep into which he should place the stools, urine and all discharges from the patient, and the same shall be more than 100 feet from the well and stream, and cover it. Disinfection is being done indifferently, notwithstanding the advice already given by the attending physician. The father and mother are nursing. March 25, on receipt of a telephone message from a doctor that this Polish Hebrew was shipping milk to the Steinsburg Creamery and that the creamery manager told the physician, the Hebrew stated I granted him permission to do so. I have this day issued a notice to the proprietors and manager of the Steinsburg Creamery to refuse milk and any dairy products from the Hebrew until a certificate of disinfection is issued by the local Health Officer after recovery.

March 29, examined one alleged case of typhoid fever on a premises in West Rockhill Twp., made a positive diagnosis, the daughter being ill. The Health Officer placarded the premises immediately. This is the fourth case of typhoid fever on this farm since January 1911, and he has asked to have samples of the water supply sent to the Laboratory for examination. All the necessary precautions were taken to prevent the spread of the disease. The mother is nursing.

June 13, inspected a dairy farm in Lower Makefield Twp. where a case of typhoid fever existed. There are six cows on the farm and the milk is sold at retail on the streets of Trenton, N. J. During my visit arrangements were made for a neighbor living an eighth of a mile distant to take full charge of the dairy and dairy products, and to take his meals away from the house. They assured me that they will stay strictly away from the house during the quarantine period. The patient is isolated, and all precautions are being taken to prevent spread of the disease. The patient's sister is nursing.

June 30, inspected a dairy farm in Hillton Twp., the son being ill with typhoid fever. They are fourteen cows on the farm and the milk is being delivered to Moyer & Co.'s Creamery at Blooming Glen. During my visit the householder arranged to sleep in the barn and eat at a house about one-eighth mile distant. He assured me he will take full charge of the dairy, and not permit his two sons who enter the home occupied by the patient to come in direct or indirect contact with the cows, milk or milk utensils during the entire period of quarantine. All necessary precautions are being taken, and the patient's sister is doing the nursing. Source of infection is probably where the young man was employed.

July 15th, inspected the dairy farm of W. J. L. in Plumstead Twp. where there was a case of typhoid fever. Seven cows on the farm and milk is delivered to the Curley Hill Creamery. During my visit a neighbor about one-eighth of a mile distant promised to do all the milking and eat and sleep at his own home. They assured me they will do everything they can to prevent the spread of infection.

July 25th, inspected a dairy farm in Northampton Twp. where there was a case of typhoid fever. There are two cows on the farm, butter is manufactured and sold at retail on the streets of Trenton, N. J. Since the householder refused to eat and sleep elsewhere and would not transfer his cows to premises free from any communicable disease, the sale of milk and all dairy products was ordered discontinued during the entire period of quarantine and until released by the local health authorities. All necessary precautions are being taken, and the source of infection is doubtless in Philadelphia, since the patient became ill two or three days after coming from her home in Philadelphia intending to visit the family.

August 10, inspected a dairy farm in Southampton Twp., the householder being ill on the premises with typhoid fever. There are six cows on the farm, and butter is manufactured, and sold on the streets of Philadelphia, G. K. and M. M. do the milking, handle the milk and milk utensils, manufacture and handle the butter.

The former eats in the Winifred dining room and sleeps at home about one-fourth of a mile distant, and the latter eats and sleeps in the Winifred house. The manufacture of butter is done in the house and in the basement of the same building where the infection exists. I carefully reviewed the Department's ruling to the one in charge of the illness of H. W., and since he refused to transfer the cows or arrange for the milkers and those who manufacture the butter to live elsewhere and manufacture the butter away from the house, have ordered the sale and marketing of milk, butter and all milk products discontinued during the entire period of quarantine. I have, however, given the substitute householder an opportunity to submit a plan of transfer of the work or cows by tomorrow, but

warned him that he should not resume the sale of milk or butter unless I advised him definitely after reviewing the proposition. All precautions are being taken to prevent the spread of the disease and the wife is doing the nursing. Source of infection is unknown, probably Philadelphia, since the patient spends a day or two in the latter place each week. Aug. 11, a letter from L. M. received today states: "Will not make butter since the change required would be too expensive."

Aug. 17, inspected a dairy farm in Plumstead Twp., the householder's wife being ill with typhoid on the premises. There are 11 cows on the farm and milk is delivered to the Union Creamery at Wismer, Pa. Arrangements were made today for a neighbor living one-eighth of a mile distant to do the milking and take full charge of the dairy, as well as eat and sleep away from the house infected. All the necessary precautions are being taken.

Aug. 24, just as soon as I made a diagnosis of typhoid fever at a farm in Plumstead Twp. where the son was ill, I immediately regulated the dairy owned and operated by the householder. There are two cows on the farm and milk is being delivered to the Plumsteadville Creamery. Following my instructions, the householder has transferred his cows to his brother's farm about one and a half miles distant, the latter place being free from communicable disease.

J. G. assured me he will stay strictly away from the cows and milk during the entire period of quarantine. All precautions are being taken and disinfection is being performed by a professional nurse from Philadelphia who has full charge of the patient. In connection with the above I wish to call your attention to the very unsanitary conditions in the village of Plumsteadville, one side of the short street being involved, nearly every one of the five or six homes having had one or more cases of typhoid fever recently. There is a collection of filthy drainages beginning at the P. H., and additions are made to the same as it passes back of the row of residences, and close to the water supply, (wells) which is undoubtedly infected. During the past one and one-half years there have been nine cases of typhoid fever in the homes of the people on the one side of this small block. I suggest that water containers be sent to the Health Officer to have samples of water sent to the Laboratories for examination. I have advised these residents to boil, for thirty minutes, all the water they use until further notice.

Aug. 31, inspected a dairy farm in West Rockhill Twp., a married daughter being ill with typhoid fever. Seven cows on the farm, and the milk is delivered to the Branch Valley Creamery at Telford R. D. During my visit the householder arranged to eat and sleep at a place about one-eighth of a mile distant and take full charge of the dairy himself. The proprietor assured me he would stay strictly away

from the house in which the patient lies ill, during the entire period of quarantine, and no person who enters the home shall be allowed to come in contact with the cows, cowstable or dairy products. Patient is isolated and all precautions are being taken.

Sept. 2nd, inspected a dairy farm in Plumstead Twp., the householder being ill on the premises with typhoid fever. Nine cows on the farm and milk is delivered to the Curley Hill Creamery. The mother and son do the milking, take care of the cows and stable, handle the milk and utensils and eat and sleep in the house with the patient. Immediately ordered the marketing of milk and milk products discontinued until they could either have the cows transferred or secure some reliable person from another farm to take charge of the dairy. All necessary precautions are being taken, and they have secured R. H. living one-half mile distant to take full charge of the dairy and eat and sleep at his own home where the water for scalding the milk utensils will be boiled.

Sept. 5, inspected a dairy farm in West Rockhill Twp., the milk being sold on the streets of Sellersville at retail, and I noted the Branch Valley Creek where the owner waters his cows. He has 19 cows owned by his brother-in-law and they supply milk to about 115 customers each day. Along his milk route there have been six cases of typhoid fever, and along the other two milk routes in Sellersville no cases of typhoid have been reported. His pump well is in the milk house and has a carefully sealed top, the milk house is kept clean, no apparent fault exists in the handling of the milk. There has been no typhoid fever on the premises since I. H. was ill with the disease about six years ago. A possible fault with the dairy farm is the manner in which he is compelled to water his cows; they drink the water of the Branch Valley Creek, stand and wade in these waters, and possibly the water in the creek is infected with the *B. coli*. The Branch Valley Creek empties into the Perkiomen Creek below Schwenksville, I believe. When I say, possibly the water in which the cattle stand, while drinking is infected, it is a conclusion of my own after looking at the filter beds of the P. C. sewage plant, about two miles above his place. The fluid, of course, empties into the Branch Valley Creek at this point, but when I looked at the beds and the methods of handling the sewage without being able to enter the pumping house, it appeared to me that only a small portion of the sewage filtered through one of the beds and the larger portion was thrown around these beds and directly into the creek. I was informed today that a representative from the Engineering Division of the Department took samples of water from the Branch Valley Creek within the past few days. The owner has promised to keep his cows from the creek until a report of the bacteriological examination is received by him.

Sept. 7, inspected a dairy farm in West Rockhill Twp., a son being ill with typhoid fever. Three cows on the farm, and milk is sold to a man who retails it in Sellersville. During my visit on the premises the householder's wife arranged for A. N. to take full charge of the dairy, water the cattle at the pump well instead of allowing them to stand in the Branch Valley Creek while drinking, and A. N. to eat and sleep at his own home about one-fourth of a mile distant. The patient is isolated and all precautions are being taken. On same date upon receipt of advice from the Health Officer in the same Twp., that another case was reported on a dairy farm, and that the regulations established on the premises on Aug. 31, '11 had been violated, I have this day visited the premises while in the neighborhood. There are seven cows on the farm and the milk is delivered to the Branch Valley Creamery in Telford. The householder had promised with emphasis on Aug. 31, that he would eat and sleep on another farm, but I found today that he has been visiting the sick room, although he assured me, as follows:—"When I promise to eat and sleep at C's, you can believe me." Therefore I have this day ordered the marketing of milk and of all milk products discontinued during the entire period of quarantine and until a certificate of disinfection is issued, and I have served notice on the proprietor of the Branch Valley Creamery at Telford, accordingly.

Sept. 16, inspected a dairy farm in Richland Twp., the daughter being ill with typhoid fever. Four cows on the farm and milk is made into butter and sold at retail. The householder would not establish safe regulations for his dairy, and objected to transferring his cows to premises free from any communicable disease, therefore I ordered the marketing of any milk or milk products discontinued during the entire period of quarantine. The householder seemed satisfied under the circumstances, and told me they would use the milk and butter in the house so far as possible, and feed the remainder of the milk to the pigs. Patient is isolated and all necessary precautions are being observed.

Sept. 18, inspected a dairy farm in W. Rockhill Township, his wife being ill on the premises with typhoid fever. Thirteen cows on the farm and the milk is shipped to Philadelphia. During my visit the householder arranged to have a neighbor, living about one-fourth mile distant, take full charge of the dairy and dairy products and eat and sleep away from the house. He assured me that this would go into effect before the next milking. I ordered removal of the privy which stands on the surface within twenty feet of the drinking well. Patient is isolated and a sister is doing the nursing.

Sept. 19, inspected dairy farm in Northampton Twp., a daughter ill with typhoid fever. Fifteen cows on the farm and milk is shipped to Philadelphia. The householder arranged with a neighbor living a

half mile distant to take full charge of milking during the entire period of quarantine, and he assured me that there would be no mingling of the family with the dairy, until released by the Health Officer.

Oct. 9, inspected a dairy farm in Richland Twp., a daughter being ill with typhoid fever. Eight cows on the farm and milk is sold to a retailer who delivers it in Quakertown Borough. Owing to the attitude of the householder was compelled to order the marketing of milk and milk products discontinued to insure a safe supply for the public. Oct. 12 he transferred his cows to a neighboring farm about one-fourth mile distant, having granted him this permission during my visit.

Oct. 6, inspected a farm in West Rockhill Twp., the wife being ill with typhoid fever. There are two cows on the farm and the milk is being delivered to the Trumbauersville Creamery. Since the householder would not establish safe regulations for the care of his dairy products and would not transfer his cows, ordered the marketing of milk and milk products discontinued during the entire period of quarantine. All necessary precautions in regard to excreta, etc., are being observed.

Oct. 14, inspected a dairy farm in Falls Twp., a son being ill with typhoid fever. The householder would not establish a safe regulation for the care of his dairy and would not transfer his cow, therefore, I ordered the marketing of his milk discontinued. The patient is isolated, and mother is nursing.

Oct. 16, inspected the dairy farm of J. S. S. in Plumstead Twp., the hired man's child being ill on the premises with typhoid fever. Twelve cows on the farm and milk is being delivered to the Wismer Creamery. The householder arranged for himself and daughter to take full charge of the dairy and stay away from the house in which the sick child lies. The householder also assured me that the father of the sick child will not be allowed to come in direct or indirect contact with anything connected with the milk products during the entire period of quarantine. The patient is isolated and all precautions are being taken.

Oct. 28, inspected a dairy farm in Milford Twp., the wife being ill with typhoid fever. Four cows on the farm and milk is being delivered to the Trumbauersville creamery. The householder would not establish safe regulations for the care of his dairy on the premises, therefore, ordered the marketing and sale of milk products discontinued during entire period of quarantine. Patient is isolated and disinfection in the sickroom is under the guidance of the attending physician, but is of no value. I instructed the nurse, mother of the

patient, as to the manner in which the urine, stools, discharges, etc., should be disinfected before burying the same, which they agreed to do.

Oct. 28, on receipt of advice from the Health Officer of at least six cases of typhoid fever near Finland in Milford Twp. I have this day made an inspection. One premises was placarded Sept. 6, and the well was cleaned by drawing off the water and taking out a dead snake and dead toad. I told the householder this method of cleaning a well was of no value, it being a dangerous way of easing the mind and endangering human life, should the well be infected. I carefully instructed him in the proper manner in which the well should be disinfected with repeated use of large quantities of lime and scrubbing of the walls. The well is a private well, but the water is used for drinking purposes by the children of Gerhard's school, located almost directly opposite. It is probably made a public well by courtesy. I suggested that the school directors be advised to bore an artesian well on the grounds of the Gerhard school in Milford Twp.

There is no well or spring on the place therefore, the neighbors' well must be used by the school children. I gave further orders to have his place cleaned up, for it was filthy. Another premises recently placarded for typhoid fever was in fairly good sanitary condition, but I recommended a few changes in drainage. I also went over the matter of disinfection of the excreta, detailing the methods to the nurse, and pointing out the danger when no disinfection is done. Relative to the premises of G. T. F. in the neighborhood, wife having been removed to a Philadelphia hospital ill with typhoid fever, I advised that the drinking well be cleaned, and instructed the householder in the manner in which the same should be disinfected, for, although the water may not be infected with *B. coli*, it shows a contamination by the ordor. The place needs a general cleaning up and have ordered the same done. M. S.'s place where two children are ill at present with typhoid fever is unclean. There is no disinfection of the stools, urine nor bedding, and the utensils from the sick room are not kept separate from the dishes used by other members of the household. I have shown the mother how to disinfect the excreta and clothing, and instructed her relative to the proper disposal of the stools, urine and wash water. Have ordered a general cleaning of the well with unslaked lime, etc. At another home where it is alleged a boarder had recently been ill with typhoid fever there is a well in the open yard which has always been used by neighbors, and, although open for public use it is a private well, and was long ago found to be badly affected with *B. coli*. About nine years ago when at least seven cases of typhoid fever existed in the neighborhood a bacteriological examination of samples of the water showed the infection. About 18 months ago when there were at least four

cases of typhoid in the neighborhood the Department's laboratory report showed the well infected with *B. coli*. At the time I ordered and directed by letter that the well should be cleaned and noted the manner in which the disinfection should be done. The householder told me today that he did clean the well, but acknowledged that he used no lime. I told him of the great danger of such a well of water, and advised him to abandon same. I have advised the householders and wives in the various homes visited to boil, for thirty minutes, all the water used until they are convinced their wells are free from infection.

Oct. 30, inspected dairy farm in West Rockhill Twp. where a grandchild is ill with typhoid fever. Seven cows on the farm and the milk is delivered to the Branch Valley Creamery at Telford R. D. Two cows are to be transferred to a nearby farm, and the other five which he retains on his own farm are to be kept for private use in the family. I have given definite orders not to ship or sell milk or any products from the premises during the entire period of quarantine and until a certificate of disinfection is issued. Have served notice on the proprietor of the Branch Valley Creamery at Telford R. D., accordingly. This is the sixth case of typhoid fever on the premises during the past year, with one death. There is a gross carelessness in the house and the place is filthy. Have ordered a general cleaning of the premises and the Health Officer will collect water samples for bacteriological examination. Patient is not isolated but lies in the kitchen with the large family. The stools are being disinfected under the guidance of the attending physician and deposited in a newly dug trench more than 100 feet from the well or any stream, and covered. The mother is nursing. Have given the householder, the nurse and the other adult members of the family detailed instructions so the spread of the infection may be checked.

Nov. 17, inspected a dairy farm in West Rockhill Twp., the son Paul, being ill with typhoid fever. Three cows on the farm, and the milk is delivered to Musselman's Creamery at Telford. Householder would not establish safe regulations for the care of his dairy on the premises, therefore, ordered the marketing of his milk and any milk products discontinued during the entire period of quarantine, and served notice on the proprietor of the creamery accordingly. Patient is isolated, but there has been no disinfection of the excreta. Have given instructions as to the proper manner of taking all precautions.

Nov. 21, inspected the farm of J. G. F. in West Rockhill Twp., a son being ill with typhoid fever. Twelve cows on the farm, and the milk is shipped to Philadelphia. During my visit, arrangements were made with a neighbor, living about one-eighth of a mile distant

to take full charge of the dairy, also eat and sleep away from the infected house. Patient is isolated and excreta carefully disposed of; have also advised the members of the household to boil all water used until the well and covering over same have been repaired and a change made diverting surface drainage from the well.

Nov. 28th, inspected a dairy in Tinicum Twp., four members of the family being ill on the premises with typhoid fever. Safe regulations could not be established on the premises, therefore, the marketing of the milk was ordered discontinued during the course of the illness. Patients occupy the various rooms in the house, there has been no disinfection of the excreta, therefore, I have called the neglect to the attention of both the attending physician and the family and they promised to disinfect and bury the discharges more than 100 feet from the well or any stream. The mother is nursing.

On receipt of advice from the Health Officer, a physician, that an outbreak of eight cases of typhoid fever exists in the village of Ottsville, Tinicum Twp. I made an inspection. These cases have all developed within the last six weeks, but the attending physician had been unable to recognize the disease early. The eight cases are in two families. The well water at one of the premises is possibly infected. The two families having used the water. The other family living on the opposite side of the road, explained to me that sometime ago they began to use the water from the other family's well since they did not like the taste of the water in their well. In the one family I would suspect the extension of the disease was caused by carelessness and no disinfection of any kind; but in the other family a professional nurse is employed, and disinfection of excreta, etc., is being done by her. I have warned both families relative to thorough disinfection, describing the methods to the family where no professional nurse is employed, and advising both families to boil all drinking water until the purity of the water supply is proved. The well on the one premises is located within 25 feet of the privy and there is a possibility of drainage from the latter. Previous history at both places is negative. The attending physician desires the water on the first named premises examined, and I believe it should be done. I therefore, suggest that bottles should be sent to the Health Officer for that purpose.

Dec. 3, inspected a dairy farm in Warwick Twp., where there is a case of typhoid fever. The householder would not establish safe regulations for the care of the dairy products and objected to transfer his cow to other premises, therefore, I ordered the marketing of milk discontinued during the course of the disease. Patient has been isolated, but there has been no disinfection. The nurse promised to disinfect the excreta and see to its proper disposal.

Dec. 8, inspected a dairy farm in Plumstead Twp., a daughter being ill on the premises with scarlet fever. Four cows on the farm, and the milk is delivered to the Gardenville Creamery. During my visit arrangements were made with a nearby neighbor to take full charge of the dairy, also eat and sleep at his own home. All the necessary precautions are being observed, and the mother is doing the nursing.

Dec. 8, inspected a dairy farm in Doylestown Twp., where the proprietor was ill with typhoid fever. Fourteen cows on the farm and milk is shipped to Philadelphia. During my visit, arrangements were made for M. R. F., who has an interest in the farm, to transfer the cows to his farm at Jamison. I warned the householder's wife not to ship nor sell milk or any milk products from the premises. Patient is isolated, but there has been no disinfection of the excreta. I gave full instructions as to how to perform disinfection of all excreta, etc., and they promised to do as directed.

DIPHTHERIA.

Jan. 5, inspected a dairy farm in Warwick Twp., two children being ill on the premises with diphtheria. Five cows on the farm and milk is being delivered to the Warwick Creamery, at Jamison. During my visit arrangements were made for E. De H. to take full charge of the dairy and products and eat and sleep in a distinctly separate part of the double house on the farm. Patient is isolated, and householder has assured me that he will stay strictly away from the cows and stable during the entire period of quarantine.

Jan. 9th, inspected a dairy farm in Richland Twp., a daughter being ill on the premises with diphtheria. Three cows on the farm and the milk and butter are sold at retail in the neighborhood. Arrangements have already been made for her son living next door, to do all the milking, take care of the cows and stable, and the few pounds of butter made is now being manufactured by the daughter-in-law living in the second house distant. The householder has assured me that she will stay strictly away from the dairy and dairy products during the entire period of quarantine. Patient is isolated, and mother is nursing.

Feb. 14, inspected the dairy farm in Lower Makefield Twp., where a daughter had diphtheria. Five cows on the farm and milk is sold at retail in Yardley Borough. Householder did not want his hired man to eat and sleep elsewhere, nor would he transfer the cows to other premises, therefore, ordered the marketing and sale of milk discontinued until quarantine is lifted.

Feb. 18, inspected a dairy farm in Wrightstown Twp., a son being ill with diphtheria. The proprietor sells milks in the neighborhood, and during my visit he arranged to have his hired man take full charge

of the dairy and products, and eat and sleep at his own house, Penns Park, about one mile distant. The patient is isolated and the mother is nursing.

Feb. 24, inspected a dairy farm in Milford Twp., a son being ill with diphtheria. Four cows on the farm and milk is being delivered to the Trumbauersville Creamery. The householder arranged to eat and sleep at his mother's home, next door where he will boil the water for scalding the milk utensils, and take care of the cows and stable, handle the milk and utensils. The father is a cigar maker, therefore, a neighbor hauls the milk to the creamery, both father and neighbor have agreed to stay away from the quarantined house. Patient is isolated and the boy's mother is nursing.

Feb. 26th, inspected a dairy farm in Hilltown Twp., the daughter being ill on the premises with diphtheria. Five cows on the farm and milk is delivered to the Dublin Creamery. During my visit the householder agreed to eat and sleep in an unoccupied wing of the house, with communicating doors unlocked, where he will prepare his own food and boil the water for scalding the cans and milk utensils. He assured me that he will stay strictly away from the main part of the house during the full period of quarantine.

July 13, on receipt of advice from the Health Officer I visited Highland Park camp meeting grounds in West Rockhill Twp., made an investigation and an inspection. There are about 50 cottages in the camp, made a careful inspection with the Health Officer, but found the alleged case of diphthreia, not reported, was based solely upon fear and gossip. There is however, a reported case of diphtheria in one of the cottages, a child from Philadelphia. No antitoxin was administered. Cottage is placarded for diphtheria. Found the camp meeting ground in an unsanitary condition. The two public privies are open and they drain indirectly to the east branch of the Perkiomen Creek, a public water supply. Wastes and wash water of various character is further dumped into a channel which drains into the same natural water course. Instructed the Health Officer to bring the matter to the attention of the Superintendent, and ask him to clean up and change the system.

July 27th, inspected a dairy farm in Lower Makefield Twp., where there was a case of diphtheria. Six cows on the farm, butter and cheese is manufactured on the premises and sold at retail on the streets of Trenton, N. J. During my visit, the householder arranged with a neighbor about one-eighth of a mile distant to take full charge of the dairy products, also sleep away from the house that was infected. All necessary precautions were taken.

Aug. 29th, inspected a dairy farm in Lower Makefield Twp., a daughter being ill with diphtheria. Five cows on the farm, butter is made and sold at retail on the streets of Trenton, N. J. This being

the third case of diphtheria in the home within the past few months, I had the Health Officer make special inquiry should additional cases develop. Irregularities in the dairy having been reported, visited the place today. The man in charge and one of the milkers and butter makers admitted to me today that he is sleeping in the house where the patient lies ill. I also saw him in contact with the nurse. I therefore, ordered the shipping and marketing of all products discontinued during the entire period of quarantine and until a certificate of disinfection is issued. I granted permission to transfer the cows to premises free from communicable disease, requiring that they write to me if the same was effected before shipping any milk products from the place of transfer. Patient is isolated, and the mother is nursing, but she moves about the entire place, saw her in contact with the milkers today, therefore, was forced to act firmly.

Oct. 14, inspected a dairy farm in Falls Twp., where the daughter was ill with diphtheria. Four cows on the farm, butter is made and sold on the streets of Fallsington. During my visit on the premises, arrangements were made for C. S. to do all the milking and the work connected with the stable, and stay strictly away from the quarantined house. Patient is isolated, and the mother is nursing. Ordered Fallsington School in Falls Twp., closed for disinfection, the girl having attended the same as a pupil.

Oct. 27, inspected a dairy farm in Tinicum Twp., a daughter being ill with diphtheria. Four cows on the farm, butter is manufactured and sold at retail in the neighborhood. Would not establish safe regulations for the care of dairy products and objected to transfer of the cows, therefore, I ordered the marketing of all milk products discontinued until quarantine is lifted. Instructed the mother, who is nursing, since the patient is not properly isolated.

Nov. 14th, inspected a dairy farm in Falls Twp., two children being ill on the premises with diphtheria. Three cows on the farm, butter is manufactured and sold to a man at Fallsington, and milk is sold in the neighborhood. Householder would not establish safe regulations for care of the dairy products on the premises and objected to transfer of the cows, therefore, ordered the marketing and sale of milk and all milk products discontinued until quarantine is lifted. Patient is isolated, and the mother is nursing.

Dec. 4, inspected a dairy farm in Falls Twp., the son being ill with diphtheria. Twelve cows on the farm and the milk is delivered at Fallsington to a man who sells it at retail on the streets of Trenton, N. J. During my visit on the premises, the householder arranged for the hired man and adult son to take full charge of the dairy, and both of them to eat and sleep at the hired man's home about one-fourth of a mile distant. Householder promised that all necessary changes would become effective before the next milking, and the

milkers named would not be allowed to enter the quarantined home. The proprietor also assured me that he would stay strictly away from the cows and stable, milk and milk utensils until the premises were released from quarantine.

Dec. 11, inspected a dairy farm in Falls Twp., here an Indian boy was ill with diphtheria. Three cows on the farm, butter is manufactured and sold at retail in Tullytown. Householders would not establish safe regulations for the care of the dairy products and objected to transferring the cows to other premises, therefore. I ordered the marketing of all milk products discontinued until quarantine is removed. The young ladies who owned the farm did the nursing.

Dec. 23, inspected a dairy farm in Plumstead Twp., where the wife was ill with diphtheria. Three cows on the farm, and milk is delivered to the Wismer Creamery at Wismer. Householder arranged for a man living a half mile distant to take full charge of the dairy and eat and sleep at his own home, where he will boil the water for scalding the cans and milk utensils. The proprietor has assured me that he will stay strictly away from the cows and cow stable, milk and utensils. The patient is isolated and the mother is nursing.

SCARLET FEVER.

Jan. 26, inspected a dairy farm in West Rockhill Twp., a daughter ill on the premises with scarlet fever. Four cows on the farm and butter is manufactured and sold in the neighborhood. Householder arranged for his two sons to take full charge of the dairy, and eat and sleep in a separate part of the house not frequented by anyone that is in direct or indirect contact with the sick room. Further, arranged for the adult daughter to occupy this portion of the house and prepare meals for the milkers; another daughter to prepare the meals for the sick, the nurse, and balance of the family who prepare food for the latter and come indirectly in contact with the sickroom. The patient is isolated, and the mother is doing the nursing. Have advised the use of window screens.

Jan. 26th, inspected a dairy farm in West Rockhill Twp., a son being ill with typhoid fever. Nine cows on the farm and milk is sold at retail in Sellersville. Arrangements have already been effected for the adult sons to take full charge of the dairy and eat and sleep in a separate part of the house. Water for scalding the cans and milk utensils will be boiled in a small building near the barn. They convinced me that the milkers will not come in contact with the patient, the nurse, or anything that passes to or leaves the sickroom, and being an intelligent woman I believe she will carefully guard the milk supply during the entire period of quarantine. All necessary precautions are being taken to prevent spread of the disease.

Jan. 30, inspected a dairy farm in Doylestown Twp., a son being ill on the premises with scarlet fever. Four cows on the farm, and the milk is shipped to Philadelphia. Householder has arranged with a neighbor living about one-half mile distant to take full charge of the dairy and eat and sleep at his own home. Water for scalding the milk utensils will be boiled at a small shed near the barn. They assured me that those attending to the milk products will stay strictly away from the infected premises until quarantine is removed.

March 12, inspected a dairy farm in Haycock Twp., the owner's wife being ill with scarlet fever. Seven cows on the farm and milk is delivered to Keller's Church Creamery. Householder takes care of the dairy, eats and sleeps in the house, and nurses the patient. I promptly ordered the marketing and sale of milk products discontinued, but granted permission to transfer the cows to another premises.

March 30th, inspected a dairy farm in Hilltown Twp., a daughter being ill with scarlet fever. Three cows on the premises, and milk is delivered to the Blooming Glen Creamery. Householder eats and sleeps in the house, has charge of the dairy and products, and comes in contact with the nurse. Proprietor objects to transferring the cows to another premises, therefore, ordered the marketing of milk and milk products discontinued until premises are disinfected.

April 12, inspected a dairy farm in Doylestown Twp., the wife and daughter being ill with scarlet fever. There are nine cows on the farm and the milk is shipped to Philadelphia. Householder has charge of the dairy and comes in contact with the patients and nurse. Objected to transferring the cows to another premises, therefore, ordered the marketing of all milk products discontinued until premises are disinfected. Isolation of the patients is imperfectly effected, and an elderly lady is nursing assisted by the householder.

April 8, inspected a dairy farm in Lower Makefield Twp., where there is a case of scarlet fever. Twelve cows on the farm, and the milk is sold at retail in Yardley Borough. Found the householder occupying one of his bungalows along the Delaware River, across the public road from his home. He assured me that he eats, sleeps and prepares his own meals in the bungalow, and that he will take full charge of the dairy himself, and further promised that he will not enter the home where the contagion exists, and no person from the quarantined house shall have anything to do with the milk products until disinfection is performed. Water for scalding the cans, etc., is boiled in the bungalow. The patient is isolated and mother is nursing.

July 21, inspected a dairy farm in Middletown Twp., a son being ill on the premises with scarlet fever. Seven cows on the farm, and milk is shipped to Philadelphia. The man and wife have charge of

the dairy, boil the water for cleansing the milk utensils in the kitchen and come in direct contact with the patient. Householder refused to board and sleep elsewhere, also refused to transfer the cows to another premises, therefore, ordered the marketing of the milk and milk products discontinued during the period of quarantine. The patient is not properly isolated, sanitary conditions are bad, and the father and mother are nursing. Ordered the householder to clean up around the premises and house and to use window screens.

Aug. 8th, inspected a dairy farm in Plumstead Twp., a boarder's child being ill on the premises with scarlet fever. Six cows on the farm, and milk is delivered to the creamery of the Crystal Spring Dairy Association at Carversville. The householder told me he had been eating at a farm house about one-fourth of a mile distant, and sleeping in a barn since the onset of the illness, but I found the statement was not truthful. Therefore, ordered the marketing of the milk discontinued during the entire period of quarantine, for he would not transfer his cows to another premises. The attending physician seemed interested in such milk regulations as would not interfere with the sale of the dairy products, but when I asked the doctor to guarantee the safety of the milk if sold to the public, he refused to do so. The doctor finally agreed with me that the order made is the only safe one under existing conditions. Efforts of the physician to isolate the patient and establish disinfection in the sick room, is defeated by the members of the household and the boarders.

Oct. 13, inspected a dairy farm in Bedminster Twp., a daughter being ill on the premises with scarlet fever. Three cows on the farm, and milk is delivered to the Dublin Creamery. Householder would not establish safe regulations for the care of the dairy products, and objected to the transfer of the cows, therefore, ordered the marketing of milk products discontinued until the premises is disinfected and quarantine removed.

Nov. 13, inspected a dairy farm in Lower Makefield Twp., a daughter being ill on the premises with scarlet fever. Three cows on the farm and milk is delivered to a man in Trenton, N. J., who has a milk route. The householder would not establish safe regulations for the care of the dairy products, and objected to transferring his cows to other premises, therefore, ordered the marketing of all milk products discontinued until disinfection is performed. The child had been attending the Pine Grove School in this township, so I ordered the school closed for disinfection. I have investigated the source of the present case of scarlet fever. A patient just recovering from scarlet fever in Trenton, N. J., visited a family in Newtown last winter; following this visit two of this family took sick with the dis-

ease, and a short time after the child above referred to visited the other two children who had the disease, and in consequence took it herself.

Nov. 6, inspected a dairy farm in Falls Twp., a daughter being ill on the premises with scarlet fever. Two cows on the farm and milk is sold at retail in Morrisville Borough. The householder would not establish safe regulations for the care of dairy products and refused to transfer the cows to other premises, therefore, ordered the marketing and sale of milk discontinued. Patient is isolated, but there is no disinfection in the sick room. The householder visits the sickroom frequently and the patient's mother is nursing. Ordered the Penn Valley School in Falls Twp. closed and disinfected since the patient ill with scarlet fever is a pupil in the school.

Nov. 14th, inspected an outbreak of scarlet fever among the pupils in Penn Valley School, Falls Twp. There are four cases of scarlet fever in three families among the pupils. Source of contagion could not be learned. Visited the school, received information from the teacher of an alleged case of scarlet fever in a home which I visited and found the child had been kept home for fear it would become infected if it attended school. Diagnosis negative. All the cases are quarantined, and the school closed for disinfection.

Nov. 18, inspected a dairy in Hilltown Twp., a son being ill with scarlet fever. Seven cows on the farm and milk is delivered to the Dublin Creamery. Householder arranged for a neighbor living about one-eighth of a mile distant to take full charge of the dairy and eat and sleep at his home where he will boil the water for scalding the milk utensils. The father assured me he will stay strictly away from the cows and cowstables and all milk products during the entire period of quarantine. I warned the householder if any violation of this regulation took place, the marketing of all milk products would be discontinued.

Nov. 23, inspected a dairy farm in Plumstead Twp., a son being ill with scarlet fever. Three cows on the farm and milk is delivered to the Union Creamery at Wismer, Pa. During my visit, the householder arranged to eat and sleep at a farm house about one-eighth of a mile distant where the water for scalding the milking utensils would be boiled. The householder assured me he will stay strictly away from the house in which the patient lies until the quarantine is removed. Examined one alleged case of scarlet fever on a premises in Bedminster Twp., with negative results.

Dec. 15, inspected a dairy farm in Solebury Twp., a son being ill on the premises with scarlet fever. Twelve cows, and the milk is shipped to Philadelphia. Householder arranged for his two adult sons to take care of the work connected with the milk products, also to eat and sleep at adjoining farm houses not far distant. Water

for scalding the milking utensils to be boiled in a shed near the cow-stable. They assured me of every possible precaution to prevent spread of the disease.

Dec. 15, inspected an outbreak of scarlet fever in the village of Aquetong, in Solebury Twp. There are three cases of scarlet fever in the same number of homes among the pupils of the Aquetong school, each house being under quarantine. Source of the outbreak is unknown, but it is probably in Philadelphia, for there is a free exchange of "Aid Society" children from Philadelphia in the school. Ordered the School Board to close and disinfect the Aquetong School.

Dec. 16, inspected a dairy farm in Hilltown Twp., a daughter being ill with scarlet fever. Seven cows on the farm and milk is delivered to the Dublin Creamery. Householder has arranged for a neighbor living about one-eighth mile distant to take full charge of the dairy and eat and sleep at his home. I was also assured that there would be no communication with the cow stable or anything connected with it during the period of quarantine.

Dec. 18, have ordered I. W. and his wife who conduct the tollgate at Aquetong in Solebury Twp. on the Lahaska and New Hope turnpike to discontinue accepting toll fees and giving change until the quarantine for scarlet fever is lifted from the toll house, I. M. being ill in the same small house with scarlet fever, and both he and his wife come in direct contact with the child. The President of the Turnpike Company has assured me this order will be honored.

Dec. 29th, following receipt of your instructions I visited a premises in Langhorne, Middletown Twp., made an effort to see a boy 18 years of age who is a student at the Westtown Boarding School in Chester Co., who had been exposed to scarlet fever just prior to the close of the autumn session, instructed the householder, a widowed mother with the following results: The mother of the boy told me that the boy went to a home in Chestnut Hill, Philadelphia, December 26th, and she expected him to return December 31st. The mother said the boy did not have sore throat nor seemingly the least bid indisposed. I gave full instructions as to the necessary precautions, and the mother promised that she would act in the manner outlined.

Dec. 30th, following receipt of your instructions, I visited two premises near Fallsington in Falls Twp. and examined two students of the Westtown Boarding School who had been exposed to scarlet fever prior to the close of the autumn session, instructed the householder and one of the boys with the following result: Found no evidence of any recent communicable disease, not any sore throat, no eruption nor desquamation, no glandular swelling, etc. I carefully reviewed the whole matter to the father and son, and the father assured me the boy would be kept on the premises until the time limit,

and should there appear any symptoms of the disease, he would call in a physician, or advise me. The mother was interested and expressed her fear for the health of the students following the re-opening of the winter term, and promised to act in the manner outlined to prevent the spread of the disease.

MEASLES.

Feb. 27, following the receipt of your advice I examined thirty one alleged cases of measles in Durham Twp. and made positive diagnosis of 24 cases. I ordered the Riegelsville school building closed on account of an epidemic of measles among the pupils.

March 7, examined eighteen cases alleged to be measles in Falls Twp., and made a positive diagnosis of twelve cases. Ordered Penn Manor school closed for disinfection on account of the outbreak.

March 14, examined thirteen alleged cases of measles in Milford Twp., and diagnosed thirteen cases. Ordered the Milford Square schools closed for disinfection.

March 21st, examined eleven cases of alleged measles in Solebury Twp. and made positive diagnosis of five cases. Ordered the Hillside school in Solebury Twp. closed for disinfection on account of the presence of measles among the pupils.

March 28th, examined nine alleged cases of measles in Durham Twp. and made a positive diagnosis of seven cases. Ordered the Durham and Rufe's school closed for disinfection.

April 10, examined nine alleged cases of measles in Milford Twp. and made a positive diagnosis of five cases. April 14th, examined twenty-six alleged cases of measles in West Rockhill Twp. and made a positive diagnosis of sixteen cases. Ordered the Richhill school closed for disinfection on account of the outbreak.

April 30, examined thirty-two cases of alleged measles in Southampton Twp. and made a positive diagnosis of sixteen cases. Ordered the schools closed and disinfected. I believe this epidemic to be a fault of tardy reporting by a local physician.

During May examined fourteen cases of alleged measles in Falls Twp. with nine positive cases, fifteen alleged cases in Warminster Twp. with six positive cases; seven alleged cases of measles in Buckingham Twp. with three positive cases; fourteen alleged cases in Bensalem Twp. with six positive cases; three alleged cases of measles in Bridgeton and Nockamixon townships with three positive cases; and fourteen alleged cases in Bristol Twp. with seven positive cases. Premises all under quarantine and the schools involved were closed for disinfection.

June 9th, examined nine alleged cases of measles in Tinicum township and made positive diagnosis of five cases.

CHICKENPOX.

Feb. 23, following the receipt of your advice I examined ten alleged cases of chickenpox in Bensalem Twp. and made a positive diagnosis of eight cases. Dec. 7th examined seven alleged cases of chickenpox in Milford Twp., and made positive diagnosis of seven cases.

MUMPS.

Jan. 9, examined six cases of alleged mumps in Richland Twp., and made positive diagnosis of six cases. Ordered the school closed for disinfection. Jan. 19, examined fourteen alleged cases of mumps in Plumstead Twp. and made positive diagnosis of eight cases.

Feb. 4, examined five alleged cases of mumps in New Britain Twp., and diagnosed five cases. Feb. 17, examined nine alleged cases of mumps in Wrightstown Twp. and made positive diagnosis of six cases. Feb. 28th, examined twelve alleged cases of mumps in Warwick Twp. and made a diagnosis of nine cases.

March 23d, on receipt of advice from the Health Officer that an epidemic of mumps existed among the pupils of Shaw's School in Richland Twp., also of existing irregularities, and an appeal from the teacher since she sent pupils home with mumps, etc., I visited the neighborhood, examined nineteen alleged cases of mumps and made a positive diagnosis of sixteen cases. In all cases where I found mumps existing in the schools, I ordered the schools closed for disinfection. Houses were placarded and householders in quarantined homes warned not to allow the children to leave the premises until disinfection is performed and placard removed.

Statistical Summary of Work Done During the Year.

Forms 37 received,	687		
Forms 36 received	791		
Examined cases alleged to be		Dairies inspected for	
Typhoid fever,	13	Typhoid fever,	34
Scarlet fever,	8	Diphtheria,	15
Varicella,	23	Scarlet fever,	16
Measles,	238		
Mumps,	114		
Pertussis,	37		

Stock transferred on 5 premises.

Sale of milk stopped from 24 premises.

Twenty-seven schools ordered closed on account of scarlet fever, diphtheria, measles, mumps and chickenpox.

Two Health Officers instructed at office; ten elsewhere.

CAMBRIA COUNTY.

Abstracts from Reports of Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

WHOOPING COUGH.

Dr. W. E. Matthews, C. M. I. Following a report of whooping cough in Munster, Susquehanna, Washington and Taylor Twps., I communicated with four Health Officers directing care of same. Schools were ordered closed until buildings were fumigated. During the year 73 cases were reported.

SCARLET FEVER.

Jan. 27, received information of Scarlet fever at Twin Rocks. I telephoned two Health Officers and a physician concerning the care of same. This being a very malignant form and quarantine regulations difficult to maintain, a guard was placed over the same. During July, August, October and November cases were reported at Twin Rocks, St. Benedict, Nanty Glo and Carrol Twps. Schools were ordered closed until the buildings were fumigated and all necessary precautions taken. Forty-eight cases were reported during the year.

TYPHOID FEVER.

In January seven cases of typhoid developed in Middle Taylor, East Taylor and Barr Twps. I telephoned Health Officer Edwards and John Kline concerning the care of same. In July a case of typhoid fever developed on the St. Clair Water shed; in August at Bakertown, in September and October on Hinkston Run water shed, Emigh Run and Colver. I communicated with Health Officers in the different Twps., directing the proper care to be taken. Visited Beaverdale and inspected nuisances, ordered abatement of same. Eighty-four cases were reported during the year.

DIPHTHERIA.

In January diphtheria was reported in Conemaugh Twp. Nine cases were reported in February, and March; in Portage, Blacklick and Summerhill Twps. Eighty-two cases were reported during the year. I kept in touch with the Health Officers in the townships where this disease existed, ordered schools to be closed until thoroughly fumigated, houses properly placarded and quarantine enforced.

MEASLES.

During January thirty-eight cases were reported in Susquehanna Twp. I communicated with the Health Officer ordering all necessary care to be taken, closing and fumigating schools, placarding houses, etc. Other cases developed in various townships but were carefully looked after by Health Officers. During the year four hundred and nine cases were reported.

CHICKENPOX.

Chickenpox developed in Portage, Susquehanna, Reade and Washington Twps. The necessary precautions were taken and but twenty-two cases were reported during the year.

MUMPS.

Received report of a case of mumps in Richland Twp. during January. Fifty-seven cases were reported during the year. In all of the cases proper action was taken. Proper quarantine enforced and the cases watched by the Health Officers until the recovery and disinfection.

In addition to the brief summary given I kept close watch on all communicable diseases which came to my notice. Wherever contagious diseases exist I order the Health Officer to keep close watch over the same, seeing that all laws are properly enforced and that an epidemic is prevented. I kept in close touch with the Health Officers in my district by phone, correspondence and in my office. They report to me all cases in detail so we have no difficulty in determining what is the proper action to take. In all cases of typhoid fever where the water is in close proximity to some place of filth we at once secure all the information necessary, water is sent away to be analysed and a general cleaning up of the premises is made. I have endeavored to be tactful; explaining the quarantine laws and have tried to have the Health Officers do the same. By so doing we try to make it unnecessary to resort to harsh methods. In the majority of homes where contagious diseases exist they are very willing to do all in their power to prevent the disease from spreading. Among the foreign element, we have difficulty, due to their ignorance and inability to understand our language and laws. During the year I have received numerous letters from different borough officers, physicians throughout the county and citizens asking for instructions concerning communicable diseases. Scarcely a day passes without telephone calls concerning the same. I am very glad if I am able to give them the necessary advice and if not able to do so I refer them to the Department at Harrisburg. I have been the Medical Inspector

of Cambria County since 1889 and for some years prior to that time I was Medical Inspector for Indiana, Westmoreland and Cambria Counties. My long time of service has made me personally acquainted with almost every physician in the County. I sometimes feel that I am sort of a Bureau of General Information. Were it not for the love of the work and the good I believe can be accomplished I should have given it up years ago. I consider that Cambria County is now one of the first counties in the State. It being one of the four counties that has doubled in population in the past twenty years. We now number one hundred sixty-six thousand. Almost every nation on the globe is represented. To be a good Medical Inspector or Health Officer in this County one should be able to speak twenty-four different languages.

Not understanding until late in the year that you required a detailed report of our work this report is made up from a general record that we kept. We hope to be able to give you a better report for 1912 than for 1911.

Statistical Summary of Work Done During the Year.

Cases examined alleged to be			
Typhoid fever,	82	Forms 34 received,	840
Diphtheria,	73	Forms 36 received,	676
Scarlet fever,	41	Forms 37 received,	525
Varicella,	22		
Measles,	424		

CAMERON COUNTY.

Abstracts From Reports of Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

MUMPS.

Dr. H. S. Folk, C. M. I. Following receipt of Form 34 signed by the householders reporting mumps in two homes, I inspected and checked up the diagnosis.

Statistical Summary of Work Performed During the Year.

Forms 37 received,	33	Examined cases alleged to be	
Forms 36 received,	31	Mumps,	2
Forms 34 received,	18		

The Health conditions were exceptionally good during the year and no serious outbreaks of communicable diseases were reported.

CARBON COUNTY.

Abstracts From Reports of Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

Dr. E. G. Bray, C. M. I. Carbon County had during the past year besides the usual diseases prevalent throughout the State, an epidemic of typhoid fever at Palmerton and one of measles in the western district.

MEASLES.

Regardless of the prompt reporting and placarding of all cases of measles it was impossible to prevent its rapid spread over the county. May 28th, it was necessary for me to aid the Health Officer of Kidder Twp. to enforce quarantine regulations. The premises of two men in Hickory Run were visited and after explaining the necessity of the quarantine, placards were placed. An effort was made to stop the spread of the disease at Coleraine by closing and disinfecting the schools, with fair results.

SCARLET FEVER.

A family in Upper Towamensing Twp. was reported as having scarlet fever and no placard. The Health Officer's request to investigate was complied with and three cases were found. No physician in attendance. Premises placarded.

TYPHOID FEVER.

With the exception of the outbreak at Palmerton typhoid fever in the county was scarce. The epidemic at Palmerton began the early part of December and upon instructions from the Department an effort was made to locate the source of the disease. Accompanied by Health Officer the premises of W. B. in Aquashicola was inspected. He being a farmer who sold milk to a milkman along whose route most of the cases developed. It became evident that here was a possible source of infection as the family had brought typhoid fever home after a visit in Monroe County. The premises of the other farmer supplying milk was inspected and revealed another case of typhoid fever. The water supply of the town was analyzed. Sale of milk from the possible source of infection was stopped and instructions issued that all drinking water be boiled before use with the result that the spread of the disease ended. Twenty-one cases were reported with three deaths.

May 20, the Health Officer complained of the indiscriminate spitting in the street by the patients of the Tuberculosis sanatorium in

East Side Borough. The Department took up the matter with the persons in charge of the Institution with good results.

STATISTICAL SUMMARY.

Dairy farms inspected,	2		
Sale of milk stopped,	2		
Schools ordered closed,	1	Examined cases alleged to be	
Health Officers instructed at office,	2	Typhoid fever,	6
No. forms 37 received,	220	Scarlet fever,	3
No. forms 36 received,	137	Measles,	12
Forms 34 received,	105		

CRAWFORD COUNTY.

Abstracts From Reports of Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

DIPHTHERIA.

Dr. J. K. Roberts, C. M. I. Feb. 17, I inspected and regulated the sale of milk from a dairy farm in Woodcock Twp. on which there is a case of diphtheria, milk from that farm being sold in the city. It was reported to me by the Sec. of School Board of E. Fallowfield Twp. that there was a case of diphtheria in a box car occupied by two tramps and had been diagnosed by a physician of Atlantic, and that some of the school boys had been exposed. This I found to be true. I had the boys excluded from school and gave each of them 1,000 units of antitoxin. The two tramps were quarantined in the car and cared for under the direction of the County Commissioners. Feb. 3, I made a trip to North Shenango Twp. to regulate the sale of milk on a dairy farm where there is a case of diphtheria. Had some trouble in Woodcock Twp., caused by the brother interfering, where an effort was made to return one of the children of family where diphtheria exists, to school before the expiration of the quarantine period. Inspected a farm in Sadsbury Twp. where a case of diphtheria existed, the child having died the evening before it was reported. Another child in the family received immunizing doses of antitoxin to prevent the disease. I stopped the sale of milk during the quarantine period. In Rome Twp. I investigated a dairy farm where a child had died of diphtheria the day it was reported. The remaining members of the family are now receiving immunizing doses of antitoxin. The school has also been closed, and the sale of milk was allowed to be continued with the understanding that it be handled at a neighbor's and not come in contact in any

way with the premises. Also inspected a case of diphtheria in Oil Creek Twp. where I was obliged to change the arrangements for handling the milk. They agreed to follow out instructions.

TYPHOID FEVER.

Apr. 3, made an inspection of a dairy farm in East Fallowfield Twp. and, I ordered the sale of milk stopped on account of the very unsanitary conditions all around, especially in the water supply.

July 5th, I inspected a farm in Greenwood Twp. for typhoid fever, conditions being unsanitary, and the disease I found had been visiting the farm each year for some time back, which we are now making an effort to check. Made an inspection of a dairy farm in Stuben Twp., where I was obliged to regulate the sale of milk on account of typhoid, but every other precaution was being taken, even to the matter of placarding his own house, which was very gratifying.

July 29th, I inspected a dairy farm in Troy Twp. where there was typhoid infection in the water supply, and as the people were in indigent circumstances, it made it a hard matter to change the arrangement of handling the milk. It caused considerable complication, but with constant effort I think we now have matters in hand. Another case of typhoid fever appeared in August in Greenwood Twp., and on account of their not having a milker that was not brought in contact with the patient or the discharges, I stopped the sale of milk, until proper arrangements for the milker can be made.

Sept. 23, in Woodcock Twp. I investigated a case of typhoid, but found everything in more than a sanitary condition, and all precautions being taken, the disease having been contracted while at work away from home. During October investigated three cases of typhoid in Richmond Twp., one of them had recently been removed to the Hospital. The well had been suspected for some time, and I had everything put in a more sanitary condition, and changed the arrangements of handling the milk. An interesting history of a case of typhoid fever occurred in Fairfield Twp. where two cases proved fatal: the disease having been brought there from Erie by his brother. The house was fumigated. The carpets or nothing else had been cleaned, the house was then closed all summer until time for starting to school, after which, four other children took the disease, and the mother also took it and recovered. I have had the house again fumigated, carpets cleaned, and ordered all water boiled.

Investigated a case of typhoid fever Oct. 18, in Blooming Valley, where there had been several cases a few years ago. The probable cause of the infection is a small stream, and the history shows that there had been no care used in taking care of the discharges. I would suggest that they secure an efficient Board of Health in this borough, which, for some time has been taken care of by an adjoining

township. On one trip I made two inspections Oct. 20, one in E. Fallowfield and the other in Greenwood Twp., and at the latter place I was obliged to discontinue the sale of milk products, on account of typhoid fever; and in Hartstown Borough December 22nd, I was obliged to have the milk taken care of outside by a party who does not enter the house, on account of typhoid fever. The Board of Health at this place had been disorganized, but I directed that they reorganize right away.

CHICKENPOX.

I investigated and diagnosed chickenpox in Blooming Valley June 8, where there is no Board of Health, also three cases in Woodcock township, Sept. 12, and upon receipt of information from the Health Officer October 25, that things were in bad shape in North Shenango township, I went there and found that 20 children were sent home the day before suspected of having chickenpox. Most of the cases proved to be mild, no doctor in attendance in some of them; but I had considerable trouble keeping the children out of school until the time for quarantine had expired. With my advice, however, the teacher refused to accept them without a permit, which they finally submitted to. Inspected and diagnosed an epidemic of chickenpox in North Shenango township, North Bank School, where some of the children had been attending after having the disease. I therefore ordered the school closed.

SCARLET FEVER.

January 4th, I investigated alleged scarlet fever in the New Richmond High School, which I ordered closed, and owing to a difference of opinion among the doctors of Randolph and Richmond I was called to establish the diagnosis, but I think by care we will be able to stamp out the disease. May 24th, I investigated quarantine of cases of scarlet fever and contacts from tardy diagnosis in Spring township.

MEASLES.

From February until the latter part of September, I inspected and diagnosed measles in W. Mead township, 5 cases in Summitt township on different occasions, six in Troy township, one in E. Fairfield township, in Hayfield and Richmond townships, (a case in the latter township having refused me admittance on account of not wanting the house fumigated;) and also two children in a school in Union township, who contracted it from a case in Summitt township.

MUMPS.

From January to August 30th, I made two trips of investigation to Woodcock township for mumps, one to Hayfield township, three to Mead township, one to Randolph township, two to Union town-

ship, two to Rome township, and one trip each to Fairfield, Richmond, Vernon, Bloomfield townships, and also diagnosed mumps in Blooming Valley where there is no Board of Health.

VARICELLA.

Inspected the Gilbert School, in Randolph township where I diagnosed six cases of Varicella; I had the school closed until I saw fit to reopen. During October, Varicella was epidemic in North Shenango township. The teachers of the Centralized High school are disposed to hinder the disease being found out. Only two cases have been diagnosed in two families and reported, and I feel sure the rest have either not had a doctor or have not been reported. I think this subject should be taken up at the next teacher's institute.

Statistical Summary of Work Done During the Year.

Forms 37 received,	343		
Forms 36 received,	497		
Forms 34 received,	512		
Examined cases alleged to be		Dairies inspected for	
Diphtheria,	1	Typhoid fever,	14
Scarlet fever,	3	Diphtheria,	4
Varicella,	27		
Measles,	24		
Mumps,	32		

Stock was transferred on 5 premises.

Sale of milk stopped from 7 premises.

Six schools were ordered closed on account of scarlet fever and mumps.

Seven Health Officers were instructed at office and elsewhere.

COLUMBIA COUNTY.

Abstracts from Reports of Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

VARIOLA OR SMALLPOX.

Dr. S. B. Arment, C. M. I. Columbia County commenced the year 1911 with one case of smallpox in Hemlock township, which was diagnosed as such on December 31. The man contracted the disease in a lumber camp in another county and had worked after this contact in another lumber camp. After the disease was diagnosed all contacts were vaccinated at once, two developing smallpox, his wife and child, who had it in a mild form. The child a boy of eleven years had but one postule on the face, but both had many in the hair and some on other portions of the body. Fifteen or more contacts were vaccinated in Hemlock township and

fourteen in Beach Haven, Luzerne county making a total of 29. No cases developed outside of the one first mentioned however.

Three people were examined that were supposed to have smallpox, one in Braircreek township, another in Hemlock township, neither having smallpox, and the third case was one of the mill hands in Bloomsburg who lived in Hemlock township, which turned out to be nothing but a case of spite.

VARICELLA OR CHICKENPOX.

Chickenpox made its first appearance in Columbia county in Braircreek township about February 5, which I discovered through advice from the Health Officer. I visited the school while in session and found one child had the characteristic points of the above disease. I advised the closing of the school until it was disinfected. There were seven other children absent at the time of my visit, all of whom had chickenpox broken out on them. Again on November 14 upon advice of the Health Officer I investigated the children in a school in Main township where I found nine cases in the school with the eruption on their faces. Here again I advised closing the school until disinfection, which the director agreed to do promptly. In this he failed to keep his promise, thinking I suppose that I was miles away and it would be dismissed from my mind, which is not the case with us, as I phoned the Health Officer and found the director had either forgotten his promise or broken his word. I at once got in touch with others, and finally found a man of his word, so that the work was done that same day. November 16, I was again obliged to visit the same place and found six more cases, all endeavoring to hide it; and lastly I found four cases more in this locality that had first shown evidence of the diseases November 16. At this visit I was interviewed by several people who suggested "that by large odds the greater number of scholars, had chickenpox and why not open the school to those who had the disease and keep those that had it not out." This was novel to me to say the least.

TYPHOID FEVER.

Outside of the Boroughs of Columbia County, but 22 cases of the above disease were reported during the past year, and it was not until about the middle of the year that I was called on to inspect any premises for the same. I visited a family in Connyngham township where a child four years of age had died of the disease and three other cases had developed. I found the house very unsanitary by reason of carelessness on the part of the family, bad drainage, practically no ventilation in the cellar, with many decayed and mouldy vegetables lying about. The milk from their own cow had been kept in the cellar during the cold winter months, and since then in an

outside shanty, not much better from a sanitary standpoint; no screens, and everything that could be, was left to the care of providence.

August 10, I again visited Connyngham township, where I had gone on other investigation, but having time at my disposal I visited five cases of typhoid fever in an entirely different section than those mentioned above, and found that three were secondary cases, and as they could not be properly treated at the small house where they were and would be a menace to others, I advised that an order of relief be taken out by the Health Officer and they be placed in a hospital.

In regard to the visitation of typhoid fever in the suburbs of Bloomsburg I would state that I endeavored to assist the borough Board of Health in every way I knew of, the prompt measures taken by them and the Town Council had the effect of keeping the number down to thirteen cases, and all recovered. None of the cases that had the disease during the Fall of 1911 could be traced to the Bloomsburg water supply, as all had used spring water which was found to be contaminated.

DIPHTHERIA.

Toward the close of the year on September 9th I visited Mid-Valley No. 1 Mining District, which is in Connyngham township and found diphtheria with rather lax quarantine. I advised better observance of regulations if they expected to stamp out the disease, which had at that time been breaking out at short intervals for many months. October 10, I again visited the same place and again impressed upon those living in that locality the necessity of stricter observance of quarantine regulations and although it may be of service to those living there at the time of my visit, it is doubtful if it will be followed when new tenants occupy the houses, which change hands frequently.

SCARLET FEVER.

I was not called to diagnose or inspect any person or premises on account of scarlet fever during the year 1911, but I was informed by the Health Officer that scarlet fever had developed in one of the pupils in the Newhart school in Orange township, and therefore ordered the school closed until thoroughly disinfected, which was promptly complied with.

STATISTICAL SUMMARY.

Forms 37 received,	242	Cases examined alleged to be	
Forms 36 received,	297	Variola,	2
Forms 34 received,	252	Typhoid fever,	6
		Varicella,	35

CLINTON COUNTY.

Abstracts from Reports of Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

DIPHThERIA.

Dr. R. B. Watson, C. M. I. We have had eleven cases of diphtheria during the year, seven of these occurring in Noyes township, Bitumen, a mining town. They were all investigated by the Health Officer, and after termination of the cases, the necessary disinfection was made. The source could not be ascertained. The remaining cases were scattered over the county and were promptly investigated, placarded, quarantined and disinfected.

TYPHOID FEVER.

We had fourteen cases of typhoid fever reported to the County Medical Inspector. The Health Officer quarantined these and gave the necessary instructions as to their care. The attending physicians were very exact in seeing that all the necessary precautions were taken to prevent the spread of the disease. Some of these were not contracted in our county, but the patients contracted the disease while absent from their homes.

But two cases of pneumonia were reported. There is no doubt that this is hardly correct and can be accounted for only by the fact that the attending physicians neglected to report their cases of pneumonia.

SUMMARY.

		Cases examined alleged to be	
		Diphtheria,	11
		Pneumonia,	2
Forms 34 received,	81	Typhoid fever,	14
Forms 37 received,	33	Pertussis,	3
Forms 36 received,	35	Measles,	3
		Varicella,	6
		Scarlet fever,	4
		Mumps,	2

CLEARFIELD COUNTY.

Abstracts from Reports of Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

Dr. S. C. Stewart, C. M. I. March 19, I made a trip to Bradford township to investigate the scarlet fever situation. In five families I found 13 cases. The houses were all placarded, but the children who

had partially recovered were going about from place to place and mingling with other people. After talking the matter over with the parents, they promised to observe quarantine until the time expires, and I arranged to have them watched by a member of the School Board.

May 20, I visited and investigated a supposed case of smallpox in Bloom township. When I apprised the man of the report, he denied any knowledge of anyone who was contaminated, also denied any contact with anyone; but did acknowledge that he had been sick. He showed no signs of an eruption or any indications of being ill, except a swollen condition of the tonsils. He said his throat was sore while he had the fever, and the doctor told him an eruption may follow but the likelihood was rather remote. I vaccinated him and his brother who slept with him, and he promised not to leave the premises until I gave him permission. I kept close watch over him for a week after my visit.

CLARION COUNTY.

Abstracts from Reports of Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

TYPHOID FEVER.

Dr. J. T. Rimer, C. M. I. I have had several complaints that the Health Officer of Monroe and Limestone townships had not been placarding as promptly as possible in the case of typhoid fever returned to him. On investigation I found that the trouble was, the card report had gone astray.

This district should be divided as the Health Officer lives at the southeast corner of Monroe township; while Monroe and Limestone are two of the large townships of the county.

October 14, I went to Shannondale to make investigation of typhoid conditions in that section of Red Bank township. In visiting a number of homes where the disease now exists, I found typhoid fever in families, who had it in their families last year. This shows that the sanitary conditions are not improved. I find one family with four cases who never had a case before. They live on a high hill with a fine water supply. They undoubtedly contracted this disease from the Greenawalt well on an adjoining farm where they worked part of the time during the summer season. This is an old unused well with a history of typhoid fever on this farm years ago. Wright's well in the valley is contaminated by surface water.

ERYSIPELAS.

I had some little trouble in having a house disinfected after a case of erysipelas in Washington township as they objected to having their household goods destroyed by the disinfectant. After writing the lady and assuring her that it would not destroy the finest fabric, there was no further trouble.

CHICKENPOX.

November 26, I visited the Henlen School in Washington township at the request of the Health Officer and investigated an eruption among the children. It had been diagnosed as impetigo and German measles by the different physicians.

On visiting the families and making an investigation, I found the trouble to be chickenpox, which would be taken care of by the Health Officer.

Statistical Summary of Work Done During the Year.

Number of cards 34 received,	255	Cases examined alleged to be	
Number of cards 36 received,	138	Typhoid fever,	7
Number of cards 37 received,	161	Varicella,	9
		Measles,	14

CHESTER COUNTY.

Abstracts from Reports of Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

MEASLES.

Dr. Jos. Scattergood, C. M. I. January 13. On receipt of letter from Health Officer in Nottingham township reporting Mrs. P., refusing admission to her house to placard for measles, I visited the premises and was able to negotiate through her family physician that the Health Officer be permitted to perform his duty, thus avoiding any legal complications with the householder and at the same time, carrying out the provisions of the Department involved.

April 19. Received word from the Health Officer of East Marlborough Twp. of case of measles in the household of E. W. attended by Dr. G., who has failed to report the same. Communicated with the Department immediately, as he had had trouble with this physician not reporting his cases. The case was immediately put in the hands of the Attorneys of the Department; suit was brought; Doctor

fined \$20, and costs. Physicians said he was going to appeal, but this did not take place. It is hoped that this will have a salutary effect on other physicians who are lax in this regard.

CHICKENPOX.

Dec. 22. As directed by the Department, I visited London Grove Twp. where there has been considerable chickenpox not reported, and have been able to check up sixteen cases. Instructed the Health Officer to placard all of these cases, and watch that the quarantine was not broken by the children going to school, before the expiration of the quarantine period. Also saw the teachers of the school and explained to them the requirements of the Department regarding contagious diseases.

SMALLPOX.

Jan. 22. Received phone call from Dr. R. of Kennett Square, notifying me of a supposed case of smallpox. I immediately visited the family and found the householder affected with a mild case of smallpox, having contracted the disease while attending the markets in Wilmington. There being some question in the minds of physicians about a diagnosis I phoned the Department. With Dr. Royer revisited the patient and a diagnosis was performed. The patient and five contacts were removed to the contagious ward of the County Hospital. The house was put under absolute quarantine, and action approved by the Department Jan. 27th.

April 12. Received notice from the Department of three immigrants from cholera infected ports and directed that they be kept under observation.

April 14. Visited the above mentioned immigrants and found them in excellent health, with scar from vaccination which was not successful. At the same place with these men, I found another whose name had not been forwarded to the Department, who was at this time, suffering with a case of well developed measles. He had been visited by the physician, but not reported. I immediately phoned to the Health Officer of the Township, and gave instructions that this house be quarantined and patient kept under close observation.

TYPHOID FEVER.

Nov. 27. Received word from the Department regarding a case of typhoid fever that was removed to the Pennsylvania Hospital from the Normal School. C. R. age 16, sickened November 2, admitted to the hospital Nov. 7th. Patient stated that there were eight more cases of typhoid fever at the Normal School, and find that there had been in all nine cases of suspected typhoid fever, originating in the Normal School. All of these were sent to their respective homes as soon as they began to feel ill. They were therefore not reported to the local health authorities.

SCARLET FEVER.

May 23. Visited Embreeville where a complaint had been made of the rural mail carrier who was making his rounds with a case of scarlet fever in his home. On inspection I found that the householder was not living in his home during this illness; that the regulations of the Department were being carried out and that the public was being safeguarded in every way.

June 9. Reports received of small epidemic of scarlet fever at Modena, a small village near Coatesville. These cases seemed to follow several cases of "Rash," which was so mild that the family did not call in a physician. They were probably light cases. The schools where these children have been in attendance have been closed and thoroughly fumigated. The houses have been placarded and placed in quarantine, and the Department regulations have been carried out.

June 10. Just received notice of a case of scarlet fever in Downingtown who broke quarantine, went to Phila. and landed in the Municipal Hospital. There seemed to be some misunderstanding relative to a note issued by the attending physician in Downingtown, which on investigation, proved simply to be a statement of the treatment the patient had been receiving. The Philadelphia authorities were notified of this development; the father of the child on his arrival home in Downingtown was arrested by the local Board of Health, and fined.

DAIRY FARMS INSPECTED FOR DIPHTHERIA.

May 23. Received word of case of Diphtheria existing on a premises in Marlborough Township, shipping milk to the creamery. Found that the Department's regulations were being carried out regarding the shipment of milk, the premises placarded and the usual instructions given. Also visited another premises same day where diphtheria existed and whose milk had been refused by the Philadelphia markets. I found that the premises was placarded and the Department's regulations were being carried out to the letter; everything was being done to safeguard the consumers of milk, and issued a certificate to that effect.

September 19. On receipt of word of the existence of diphtheria on a dairy farm in New Garden Township, from which milk is marketed, I visited the premises. Gave the usual instructions for the care of the milk and milk utensils, or the exclusion of the individual who was handling the milk and milk utensils, from the house, with the promise that these instructions would be carried out.

November 12. Visited a premises on the Westtown Boarding School farm, Westtown Township, on which existed a case diagnosed as membranous croup, but which I believed to be a case of Laryngeal Diphtheria. The child died within 24 hours before a culture could be

made. The father of the child was the gardener of this school, and in no way comes in contact with the children, the milk or the milk utensils, but as a matter of safety I advised him to remain away from the house for the quarantine period of ten days.

December 8. Received word of the death of a child from diphtheria on a farm in Willistown Township. This child had within the past few days returned from Philadelphia, where it evidently had contracted the disease. The house had been placarded and fumigated, but the placard had been torn down, by whom I was unable to find. I directed the Health Officer to return and placard the premises with instructions that should it be torn down a second time, prosecution would be immediately taken up.

DAIRY FARMS INSPECTED FOR TYPHOID FEVER.

August 4. On receipt of notice of typhoid fever existing on two dairy farms in E. Vincent Township, I visited each of these, made the usual inspection and found the Department's regulations were being carried out in every respect. August 10, visited two dairy farms in E. Vincent Township, and found that the Department's regulations were not being carried out. Instructed the householder that those who were doing the milking must either carry out the instructions, by living outside of the house where the disease exists, or the milk would be stopped from shipment. There appeared to be some reluctance on their part to accept these instructions, so took up the matter with the Creamery, to which the milk was being sent. After explaining the situation, the householder agreed to carry out the Department's regulations.

September 19. On receipt of notice of the existence of typhoid on a premises in E. Bradford Township from which several hundred quarts of milk were being shipped daily to Philadelphia. I visited the farm, and found the patient isolated and cared for by a trained nurse. Gave the usual instructions to the householder regarding the care of milk and the milk utensils, and those who were occupied in the production of the milk, with the promise that the instructions would be carried out.

October 8. On receiving word of the existence of typhoid fever on a property in E. Pikeland Township, and milk shipped to the Creamery and thence to Philadelphia. I found the milkers living in the same house with the patient, and so directed that they disinfect themselves and clothing, and keep out of the house until the recovery of the patient and the premises had been disinfected. This they promised to do.

While in the neighborhood I heard reports of other cases which were attended by physicians and not reported to the Department. After a careful investigation I found these rumors were without foundation.

October 9. Visited a premises in Warwick Township, a case of typhoid fever. Found the householder and his daughter doing the milking and living in the same house with the sick boy. Gave the usual instructions along the lines as laid down by the Department, that the milkers should keep out of the house until the recovery of the patient, which they promised to do. Fumigation has taken place.

October 23. Visited a dairy in Kennett Township on which was a case of typhoid fever. Found the patient well isolated and under the care of a trained nurse. The usual instructions in regard to those who handle the milk were given, with the promise that they should be fulfilled. At the same time I learned of a case of typhoid fever in the neighborhood, attended by Dr. G. and not reported. On careful investigation I was not able to satisfy myself that this patient was a bona-fide case of typhoid fever, although my belief is that the physician in attendance considered it such and had not reported it.

DAIRY FARMS INSPECTED FOR CEREBRO SPINAL MENINGITIS.

November 12. Received word of the existence of a case of Cerebro Spinal Meningitis on a dairy farm in Westtown Township. I found the patient in the care of a trained nurse. Gave the usual instructions to the householder regarding the care of the milk and milk utensils, and the exclusion from the infected house of all these connected with the production of the milk.

SCARLET FEVER (CONTINUED).

from page 3.

December 27. Having received notice of cases of scarlet fever on a premises in Westtown Township, which had gone home immediately before the holiday vacation with a questionable diagnosis which was afterward confirmed by the Department of Health of Philadelphia as being a bona-fide case, immediately phoned the Department and with Dr. Hunt visited the school, saw the Superintendent and from him obtained names and addresses of all those who were suffering or had been suffering in the nurseries with sore throat. This epidemic was peculiar in the fact of very light or absence of the rash in nearly every case. From the history of the cases sickening after their return to their home, from the physicians in attendance, it seems evident that all these cases were mild types of scarlet fever. The Department at Harrisburg was informed of the situation, together with the names and addresses of all the cases and contacts. Their home addresses were obtained and their family physicians communicated with. Absolute quarantine was placed on all of the cases residing in Pennsylvania, and the Health Officers of other states in which these children resided, were notified of the probable diagnosis. The

school was thoroughly fumigated during vacation, and the children returned one week later than the advertised holidays opening on the 23d of January 1912. Everything was done in this irregular scarlet fever epidemic that could be done to lessen the danger of spread.

GENERAL COMMENT.

During the past year, my attention has been drawn by letter or telephone to a number of cases of nuisances, such as filthy gutters, stagnant pools, drainage or cesspools into public streams, and the gutters on the roadside. All of these have received prompt attention. The property owners and tenants have been notified to abate the nuisance and the Department promptly notified of my action in these cases. As a result the nuisances have been abated promptly, with practically no obstruction on the part of either tenant or property owner.

In addition to the above brief summaries, I have always tried to keep a close watch on all reports of communicable diseases which come to my office through form 36. These forms are carefully examined to learn whether any members of infected families handle food stuffs, cigars, clothing, etc., or whether milk is shipped and handled by any of those living in the household. If such is found to be the case, immediate steps are taken to advise the individuals as to the conditions and restrictions under which the Department permits them to carry on their business.

It has been my aim to make our work educational and to teach the people the principles of health and how to properly care for its maintenance; to explain to the Health Officers the necessity of being moderate yet positive in their instructions to the people with whom they have to deal; to be fair with all and to spare none. I believe that I can say that our work has been carried on along these lines in a very efficient manner. The majority of householders are very willing to do all in their power to prevent infection, after the conditions have been explained to them. I have received numerous calls by telephone and in person from physicians, Boards of Health, citizens and others, asking for advice and instructions as to communicable diseases and methods of preventing infection. It has been my object always to explain and assist in any way possible. I believe the work of the Department is gradually being appreciated by the people as is shown by the readiness of a greater number of suspected cases to sign morbidity cards, in order to have their premises placarded and under quarantine.

However, I have to say that in a few localities of our county there seems to be an objection to carrying out the regulations of the Department, which I believe can largely be accounted for by the fact that some of our doctors consider the quarantine and its necessary

restrictions, not only a privation on the part of the privileges of the family, but also a restriction on their private rights. If it were possible to instill into some of these physicians the idea that the Department work is for the public good I think the results would be very much better.

However, in conclusion, I desire to call attention to the splendid co-operation of most of the physicians in our county, as is evinced by the promptness of their reports and the excellent instruction they give to prevent infection until the quarantine can be established by the Department.

Statistical Summary of Work Done During the Year.

Forms 34 received,	647		
Forms 36 received,	605		
Forms 37 received,	523		
Examined cases alleged to be		Dairy farms inspected for	
Chickenpox,	20	Diphtheria,	5
Typhoid fever,	1	Scarlet fever,	1
Scarlet fever,	6	Typhoid fever,	7
Measles,	1	Cerebro-Spinal Meningitis,	1
Variola,	1		

Stock transferred on two premises.

Sale of milk stopped on 2 farms.

Four schools ordered closed. Reason—Measles.

Sixteen Health Officers instructed at office. Elsewhere 5.

CUMBERLAND COUNTY.

Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

TYPHOID FEVER.

Dr. Harvey B. Bashore, C. M. I. On June 22, received information from the Health Officer of a death in West Pennsboro Township from typhoid fever, but that the case had not been reported. I visited the place and found that Dr. N. had attended the case and that he had signed the death certificate as typhoid fever. I notified the Department. Prosecution was ordered before the Justice of Peace, and the case was settled by the Doctor paying fine and costs.

November 25, at the request of the Health Officer I visited a family in Lower Mifflin Township, on account of an outbreak of typhoid fever. About September 30, a boy in this family was reported to have typhoid fever by the doctor, and the place was placarded and the usual circular of instruction given. The boy had been working on the R. farm nearby. There was not at this time, nor for one year

previously, any typhoid in the vicinity. Although our Health Officer urged the people to use all care and even furnished some disinfectants; one case after another, with about two weeks interval, went down with the disease until everyone in the family had developed it, six cases in all and no deaths. As these cases were evidently secondary—(save the first one), I had the Department nurse visit the family for two days to instruct them how to care for the sick and render any assistance possible. The sanitary conditions at this place were apparently rather good, except the habit of personal cleanliness; for example, there was only one wash basin on these premises for six persons to use. December 2nd, on orders from the Department I visited the G. farm in Lower Mifflin Township, only two miles from the L. farm mentioned above, on account of an outbreak of typhoid fever. About October 1, a child from this family was visiting on the R. farm, and returned home later with typhoid fever. Following this case, everyone in the family went down with the disease; nine cases and four deaths. I found the general sanitary condition very bad at this place, and, as at the time of my visit the father and only son were sick in bed, I ordered the Health Officer to obtain assistance and put the place in better shape. The cellar and grounds were cleaned, the privy emptied and disinfected. Of the two nurses that had been employed here, one developed the disease. I had our own nurse visit the house and render any aid possible. The water supply at the farm was examined and found to be good. All cases except the first one were of course from secondary infection. The spring on the R. farm, from which probably the two primary cases developed, was ordered cleaned, and the people advised not to use the water except after being boiled. These two families are typical of conditions in a good many country districts and illustrate the lack of habit of personal cleanliness. In each of these houses there should have been at the most but one case, for all the other cases were most plainly secondary infection. Secondary typhoid is very common in this locality among the farming population, whereas in the towns it is rather rare. I have tried to make it a point to impress the families where typhoid exists, that disinfection of the discharges, clean hands, boiled water, and cooked food are cardinal factors in preventing the spread of the disease. During the year I inspected four dairies in Silver Spring Township; two farms and one water shed in Dickenson Township, two farms in Frankford Township, one in Upper and two in Lower Allen Townships, one in Upper Mifflin Township, one farm in West Pennsboro Township, also two others in same township, on account of being situated on a watershed, and for the same reason I inspected one farm in S. Newton Township, one in Dickenson Township, two in Monroe and two in S. Middleton Township,—all for typhoid fever, and on nearly every farm I was obliged

to change the arrangement of handling the dairy products to prevent the spread of the disease.

DIPHTHERIA.

July 15, at the request of a Doctor at Bowmansdale I went with him to see a case of suspicious throat symptoms in Upper Allen Township. We found the patient to be suffering with diphtheria; the patient was promptly isolated and the house quarantined. August 15, on order from the Department I made an investigation of suspicious cases at Bella Vista, found well marked cases of diphtheria and all were promptly quarantined. October 25, at the request of the Board of Health of Wormleysburg I visited their schools and examined the childrens' throats. This borough had just passed through an epidemic of diphtheria, had re-opened their schools and were very desirous to exclude any suspicious cases. I am glad to say we found none. October 25, I was ordered by the Department to investigate conditions in Elkwood, Lower Allen Township, on account of numerous cases of sore throat, probably diphtheria. I found a number of cases(but now recovered), which, from the history, I judge to have been mild diphtheria, although the attending physician reported it as tonsilitis, the case was quarantined. November 4th, on account of several cases of diphtheria among the children of Enola schools, and at the request of the Director, I examined the throats of all of these children, and found three with suspicious symptoms; these were immediately sent home and two of them developed diphtheria in a few days. The building was thoroughly disinfected and no further trouble reported. November 18, at the request of a physician at Lisburn I visited a home in Upper Allen Township on account of suspected diphtheria. We found the patient to be suffering with the disease and the house was immediately quarantined. December 28th, on account of numerous cases of sore throat in the vicinity, I visited the Elkwood school and examined the school children, one child slightly indisposed was sent home, but developed no symptoms of diphtheria, and was re-admitted at the end of five days. During the year I inspected four dairy farms in Silver Spring Township, on account of diphtheria, one in W. Pennsboro Township, and one in Lower Allen Township. In nearly all of the cases I was obliged to change the arrangement of handling the milk products, except on one farm where every precaution was being taken. I find most of the people anxious to carry out the Department's requirements after they learn what is required.

SCABIES.

October 30, at the request of the Director I visited the Waterloo schools in Frankford Township, and found one child afflicted with scabies. The patient was dismissed until recovered.

CHICKENPOX.

Feb. 13, by order of the Department I visited the Coates School in S. Middleton Township, on account of an eruptive disease; I found three cases of chickenpox, these had had no doctor and were not reported. I sent these children home, notified the Health Officer to quarantine, and ordered the school closed, pending disinfection. I also instructed the teacher to dismiss any sick pupils and notify me if no doctor was employed; no further trouble.

November 1, I visited Churchtown schools in Monroe Township on account of the supposed presence of unreported chickenpox. I found T. S. & E. children in school with marked cases of the disease; these were dismissed and the school ordered closed until disinfected. I deputized Dr. S. of Churchtown to visit and report all cases having no physician, this was done and the epidemic speedily came to an end.

SCARLET FEVER.

During the year I inspected two dairy farms in Pennsboro Township, two in Southampton Township, one each in Dickenson, Hope-well, Newton, South Middleton, Lower Allen and Monroe Townships, in nearly all of which I was obliged to change the arrangements of handling the milk products.

SPECIAL WORK.

Following out the policy of the Department in trying to educate the people through the newspapers, I have made arrangements with one of the local Carlisle papers to publish every two or three weeks a series of County health notes from copy furnished by myself. In these notes I discuss the prevailing diseases and epidemics, the means of prevention, etc. This newspaper is in full accord with the work and very often makes editorial comments. As this paper reaches almost all the rural population, we get in touch with a class of people who may never see the great city papers.

Statistical Summary of Work Performed During the Year.

Forms 37 received,	179	Dairies inspected for	
Forms 36 received,	193		
Forms 34 received,			
Examined cases alleged to be			
Typhoid fever,	16	Typhoid fever,	15
Diphtheria,	9	Diphtheria,	7
Chickenpox,	6	Scarlet fever,	11
Scabies,	1		

Stock transferred on two premises.
Sale of milk stopped on 13 premises.
Four schools ordered closed.
Two health officers instructed at office
Two health officers instructed elsewhere.

DAUPHIN COUNTY.

Abstracts From Reports of Investigations of Alleged Communicable Diseases During the Year 1911.

DIPHTHERIA.

Dr. Paul A. Hartman, C. M. I. January 21, by direction of the Chief Medical Inspector I visited Hershey, Pa., found that a clerk in the Chocolate Works had a sore throat which was diagnosed to be "non diphtheretic" by Dr. H. This man left Hershey for Philadelphia, on Thursday at 4 P. M., since that time you have the history from Philadelphia. His room in the Hershey Inn will be disinfected by the Health Officer, and will be placarded and kept closed under the direction of the Health Officer. The office in which he worked will be disinfected. The doctor and Mrs. B. the only two who were in contact with him will be under observation.

January 26, under instructions from the Chief Medical Inspector visited Maple Dale School house in Conewago Township, and found it closed. Having notified the Secretary of School Board to keep the house closed until all danger of further spread of diphtheria had passed. The house must be thoroughly cleaned and disinfected under the superintendence of our Health Officer and at the expense of the school board. Visited another home in same township, and found a family of ten, eight children, one quite sick with diphtheria, and four others with suspicious sore throats. This family is under absolute quarantine. The sale of milk is stopped. The teacher in charge of the school was sick during the Christmas holidays with what was diagnosed tonsillitis; since that time a number of her pupils have had sore throats. The teacher no doubt had the disease and the subsequent cases are due to infection from her. April 25, by direction of the Commission of Health I inspected diphtheria conditions in Pleasant View, a suburb of Harrisburg, and found that there were in the neighborhood twenty or thirty cases of diphtheria. Several weeks prior to March 9, there was a large number of children in Pleasant View schools who had sore throats, none of which were under the care of physicians. There was no care taken to isolate these cases. The children intermingled freely. These were no doubt mild cases of diphtheria. It seems probable that these later cases are the same disease but of a more serious type.

November 3, instructed by Associate Chief Medical Inspector, Dr. Hunt, visited Hershey and made inspection of a case of diphtheria. The man sick, lived in a boarding house with 19 other young men employed in the Chocolate Works. But one man came in contact with

this case and before quarantine was placed he escaped to Middletown. He has been located and will be held in surveillance until all danger is passed. The other men in the house will take antiseptic baths under the supervision of Dr. H. and the house will be disinfected. November 25, by instruction from the Chief Medical Inspector, I inspected a family and premises five miles from Dauphin in Stony Creek Valley. Up to date there have been four cases of diphtheria with two deaths. The first, third and fourth cases were given Anti-diphtheria Serum. The second case was too delicate to take the Serum. This one and the first case died. Four other children and the father were given immunizing doses of Serum. The source of infection is probably a man from Ellendale who visited at Coxestown in whose family was a case of diphtheria.

CHICKENPOX.

February 6, by instruction of the Chief Medical Inspector I visited Linglestown and inspected a case of chickenpox, quarantine placed to-day, February 14, visited Enterline and inspected conditions there, found a case of chickenpox. The case is isolated, no trouble anticipated. March 24, was requested by Dr. H. of Hummelstown to examine a case of smallpox near that town. Found a young man having chickenpox instead. Also investigated a similar case in Duncannon, which proved to be chickenpox, and had the same experience in Lower Paxton Township, and another case on the Jonestown Road; both cases upon investigation proved to be chickenpox instead of smallpox.

TYPHOID FEVER.

August 19, made an inspection of the dairy of L. S. on the Jonestown Road, Susquehanna Township on account of a case of typhoid fever. The daughter came home from Lancaster County, where she had spent several weeks with relatives. August 13, Dr. S. of Linglestown was called in and on the 16th he diagnosed typhoid fever. On the same day she was moved to a house on Briggs street, several blocks distant. A sister went with her and is taking care of her. They have 14 cows. Stable and milk houses are in good condition and are clean. No one, who has had anything to do with the patient, has had anything to do with the milking or taking care of the milk. The water on this farm is supplied from the Hummelstown Water Company, and comes from the Swatara Creek.

August 24, inspected the dairy farm of John Brannon in Lower Swatara Township and found there Anna Brannon sick with typhoid fever since August 15. The water used on these premises is from a well. The condition of this place is not of the best. A general cleaning up has been ordered. Sale of milk has been discontinued since August 15th. This girl three weeks ago was in Susquehanna

Township for several days on a visit. September 7, inspected with Mr. H., Health Officer, four properties in Susquehanna Township. In one there are three cases of typhoid fever, now convalescent, which had been reported. The properties are not sewered. One house has two sources of water supply; the Hummelstown Water Company and a well on the premises. Water from the well will be sent to the Laboratories for examination. From the dirt and filth about, the well no doubt is polluted. In another of the premises the yard is very filthy and the cesspool filled. Premises have been ordered cleaned and cesspool emptied. There being no sewers in this section, it is a difficult matter to keep it in a good condition.

November 8, by order of the Associate Chief Medical Inspector, I inspected a premises in Swatara Township, found two cases of typhoid fever, attended by a physician of Steelton. These people came to this place from Steelton about three months previously. A small creek runs between the well and privy. The well is deeper than closet and creek. There was no typhoid at their former home nor where they now live. The milk supply is the same as is used by nearly all the people in this neighborhood. These people were not away this summer so outside water sources may be eliminated. The food supply which is sold by hucksters from surrounding towns and farmers throughout the lower end of the county is the same as is furnished to other sections of the place. So this source may fairly be eliminated. I suspect the water on the place and am sending a sample to the Laboratory for examination. At this time the house and yard are unusually clean; this is not always so. The creek which runs through a number of these properties, is frequently offensive by reason of filth running into it. This water is often used for washing purposes. This may be a cause for the trouble. This neighborhood is frequently reported as being dirty and is occasionally cleaned up by the township authorities. The people themselves are to blame for the dirty and filthy condition which often prevails.

SMALLPOX.

December 4, by order of Chief Medical Inspector I examined a man who came to Steelton November 26 from Frederic County, Md. When he arrived he had an eruption which caused no suspicion. He lives on the west side of Steelton, and frequently visits a family two doors from him. Eight days ago the neighbor and his wife took sick with smallpox, and the man who first took the disease says there were a number of such cases in the neighborhood in which he lived in Maryland last summer. He now shows marks which I believe were caused by smallpox, and I believe he infected the neighbor family also. The cases are in care of the Steelton Board of Health, and as they have vaccinated all persons living near and have placed absolute

quarantine, there should be but few cases. December 16, I visited a house on the Pike in Swatara Township and examined two cases of smallpox. Both men were employed in a livery stable in Steelton. They claim they were never in any of the houses in Steelton where smallpox had been, but they frequently met the man who came from Maryland. This house is quarantined and guards placed to protect the public. By order of the Chief Medical Inspector December 22, I visited Heckton and found four families infected with chickenpox, which we placarded.

COMMENT.

During the year there have been a large number of cases of contagious diseases, none of which assumed epidemic proportions.

The morbidity reports of the Health Officers are carefully scanned so that every effort may be made to stop or prevent the spread of contagious diseases. We must complain of the carelessness of the people in failing to call in a physician to care for their children suffering from the so-called "children's diseases." They apparently assume that the children must have measles, whooping cough, etc., that they are not dangerous, that the sooner they have them, the sooner they are over the trouble. There has been some change in this matter in the country districts; some people, while they do not call in their doctor, will notify the Health Officer and submit to placarding the premises. In the larger towns it seems to be the smart thing not to notify the authorities and thus escape quarantine. The Health Officers and myself have been working along this line and we find that the people are becoming more tractable and are beginning to see the fallacy of their former carelessness.

I hope that progress has been made during the past year in bringing the people to understand the need of general cleanliness on their farm yards and their premises in general; this is shown by the improved appearance of their fences, houses and grounds, more soap and water being used. Some of the doctors are also remiss in reporting cases of contagious diseases but this is being improved upon, so much so, that I am hopeful that this will soon cease. In other ways there is much change for the better. The County Inspector is more frequently called upon for advice and information in sanitary matters, showing their interest in the work of the Department.

Statistical Summary of Work Done During the Year.

Examined cases alleged to be			
Scarlet fever,	10	Erysipelas,	2
Typhoid fever,	30	Measles,	37
Diphtheria,	133	Smallpox,	2
		Meningitis,	1
Forms 36 received,	374	Chickenpox,	60
Forms 37 received,	303	Mumps,	24
Forms 34 received,	365	Pertussis,	61

DELAWARE COUNTY.

Abstracts from Reports of Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

MUMPS.

Dr. H. M. Hiller, C. M. I. At the end of 1910 there were a great many cases of mumps in and about Media. This epidemic continued, and on January 10, 1911, I went with the Health Officer to inspect the school at Lower Bank in Middletown Township. We found ten cases of mumps in the school and ordered it closed for disinfection.

January 16, on receipt of notice of an outbreak of mumps at the Brookhaven School, the Health Officer made a house to house inspection, and secured the names of all those under suspicion. Subsequently I sent a substitute to confirm this diagnosis, and the school was disinfected. I also inspected the Middletown School for mumps and the school house was disinfected. About this same time, three cases of mumps were reported from a school near Newtown Square. January 30, there was another outbreak of mumps near Media, and I sent a substitute who confirmed the diagnosis in some ten or twelve cases. We had in all some eighty cases of mumps in our part of the county, and the outbreak was practically concluded by the end of January. The greater number of cases come from the vicinity of Media, where the doctors had not been reporting them to the local Board of Health, and, of course, there was no school exclusion. This matter was called to the attention of the Department, and the local Board of Health was instructed to quarantine for mumps.

MEASLES.

March 22, on receipt of a notice from the Health Officer that a man in Concord Township had measles I went there and arranged matters so that the patient is completely isolated with a separate nurse who is not to mingle with the family in any way, thereby permitting the father to come and go from the house in his usual duties of dairyman. If they fail to comply with these requirements, he is to turn his milking over to the men who are required to keep away from the premises entirely. I told him that this method of procedure would have to have your sanction before it became effective, but following the precedent established after the correspondence in the case I felt that if the patient was sufficiently isolated from the family, so that the mother would not come and go in the double capacity of cook and nurse, we might consider that the arrangement was adequate. March 22, I went to a farm where the son had measles, and

where they sold butter, which was not scrupulously clean. I insisted on a new arrangement of handling the butter, and I stipulated that none of the members of the family except the proprietor, shall have anything to do with the butter making business. In talking with the Health Officer concerning this widespread and persistent epidemic I learned from them that the people themselves in all probability are responsible for the prolongation of the trouble. When the pupils remain away from school, the teacher makes inquiry, and they report that the pupils have colds, when in fact they may have any other minor contagious diseases, and any effort on the part of the teacher or neighbors to find out the facts, is much resented, but it is a fact that we have had measles in that district for a long time.

April 18, owing to the dereliction of one of our officers a few cases of measeles remained unplaced in Haverford Township. Most of these derelictions were reported to us over the telephone by the doctors in charge, and we personally inspected these cases and made the necessary quarantine restrictions.

June 27 I reported a case of measles in Concord Township where milk was sold. We notified the creamery where milk was delivered of the necessity of watchfulness in regard to instructions being carried out, and think there will be no trouble from this case. July 5, on receipt of notice that there was measles on a farm in Birmingham Township, I went there and arranged for protection of the milk. They milk twenty cows. Their spring house is some distance from the living house and the patient is isolated. I have instructed them that care must be continued throughout the entire period of quarantine and as they live near to the Health Officer, he will keep oversight of the case. The outbreak continued into July and was fairly wide spread in its distribution, but at no time very serious.

SCARLET FEVER.

January 19, upon receipts of a report of scarlet fever at a milk receiving station, I went to Booth's Corner to regulate the quarantine. I found that the man of the house was sleeping in the boiler room, and having his meals handed out to him, from the infected house, but was still using the same clothes that he had worn in the house, and was leaning on the milk vats at the time he was talking to me. After I had ascertained that he did not realize the finer points of quarantine I insisted upon him making some arrangements by which it would not be necessary for him to enter the milk room. This we succeeded in doing by the employment of a man who had helped him before. There is a case of scarlet fever down the road to Wilmington from Booth's Corner, but on the Delaware Line. As the milk is shipped to Philadelphia it might be well to let Dr. Cairns know of this fact, in order that his Milk Commissioner may regulate the same.

March 4, upon advice of a case of scarlet fever in Middletown Township on a farm where milk was sold, but every precaution was being taken. April 16, I visited another home in Haverford Township, where a driver of a milk wagon for a large dairy farm, was ill with scarlet fever. His employer informed me that the patient had not been near the dairy since the first day when he was taken ill, and, of course, he will not return to the farm until such time as the physician and Health Officer declare him fit to do so.

May 11, or May 9th, I went to Concordville to regulate the sale of milk on a farm where there is a case of scarlet fever. I have so arranged it that no one living in the house will go near the milk until the premises are disinfected. The two milkmen both are to reside and have their meals away from the infected premises. June 21, I received notice of a case of scarlet fever at a hotel in Springfield Township, and that the attending physician was moving it to Philadelphia. Being unable to get into communication with the hotel, there being no telephone nor neighbors near who had a phone, I sent word to the Doctor who had an office in Philadelphia, not to move the case as it was against the law, without first obtaining the consent from the Department of Health. June 26, I received word from the office of the Chief Medical Inspector inquiring about this removal, and made report of the facts, also Mr. P. of the legal Department of Health called upon me with the idea of prosecuting whoever was responsible for the transfer without an order from the Department of Health, of the case of scarlet fever from the hotel. Together we went to Secane, Clifton Heights and Lansdowne, and out of the tangled stories which people gave us, we confirmed pretty much what we had known before. We also located the carriage in which the patient had been transferred and had it disinfected. The hotel is a big boarding house, a regular hive of women and children, and it would seem as though it were providential if we do not have further trouble there. We discussed the question of disinfecting the entire property, as well as the room occupied by the patient, but I do not believe this is justifiable under the circumstances. We have not yet been able to determine that Dr. R. saw the child before it arrived in Philadelphia, nor have we been able to determine that either of the two doctors in attendance definitely diagnosed the case as scarlet fever before it was removed. Subsequently, the idea of prosecuting was dismissed because of our inability to obtain sufficient evidence to justify it. We had no further cases as the result of the exposure.

We had but few cases of scarlet fever throughout the year, and in fact, heard no more about it until December 27 when we were asked by the Department to inspect the pupils from the Westtown Boarding School, living in Delaware County, who had been ex-

posed to scarlet fever, but fortunately this did not lead to any further outbreak, except one case, who died shortly afterward. The home was then disinfected.

CHICKENPOX.

There was only a moderate amount of chickenpox this year, and this was largely confined to Haverford Township, although there were sporadic cases here and there throughout the county. May 17, upon receipt of information from the Health Officer that two small children were excluded from school in Marple Township because of chickenpox which they contracted some time before, I sent the Health Officer to investigate. He returned with the cards signed by the mothers. I thereupon went to Broomall and confirmed the diagnosis of chickenpox in two families. The Health Officer will disinfect before their return to school. Their nearest physician being ill, I had no nearby physician to rely on to verify the diagnosis of chickenpox, and besides, as it was a question of school exclusion, I thought it best to appear myself in the matter.

April 17, I received notice of chickenpox in a home in Broomall Township, requiring inspection to confirm the diagnosis, and I have notified the Health Officer to disinfect and issue school cards. I wish also to call your attention to the fact that one of the boys in this family developed chickenpox in the B. M. Hospital. He was quarantined there for the same, and they, of course, made no report to us, for I have yet to receive report of contagious diseases from that institution. This, however, did not prevent us from discovering the presence of chickenpox in this family, for it came through a neighbor's child, reporting the same to the school teacher at Broomall. Later in the year when we had small pox in Chester, there were also a great many cases of chickenpox. This, as usual complicated the situation for those who wished to confuse the diagnosis of chickenpox and smallpox.

WHOOPING COUGH.

There were but ten cases of whooping cough reported to this office, seven of these occurring in one family.

POLIOMYELITIS.

There was but one case of poliomyelitis which came to my notice and this case died before I received word of it.

TRICHINIASIS.

There was but one case of trichiniasis from Middletown Township. There was a vigilant search made to ascertain the probable source of infection, but despite the fact that one of the government's meat inspectors was sent here, we were unable to find where the measly

pork was obtained. This case recovered without complications. A brother also had the disease, but he was confined in a New York City Hospital.

TYPHOID FEVER.

There were relatively few cases of typhoid fever during the year 1911. One of these cases occurred in January, but most of them occurred in the late summer beginning in July and continuing into November. March 27, upon receipt of notice from the Health Officer that F. R., of Birmingham Township, was suffering with typhoid fever on a dairy farm, I went there to inspect. I found that outside help had been obtained for the milking and that they had facilities for washing the cans away from the house. I believe that their protection was adequate and therefore, permitted the sale of milk. There has never been a case of typhoid on this farm in the memory of the family, and as Mr. R. has been to sales in Wilmington lately where there are several cases of typhoid, I think it is a fair assumption that he obtained his infection away from home. August 17, I received a notice that a child had been sent from Tinicum Township to the Chester Hospital, in which the diagnosis had not yet been made. The Health Officer, however, in notifying me, called my attention to the fact that there had been a case of typhoid fever in the house for two successive summers. I therefore made the following report.

From our former correspondence, you will remember that we have had to inspect this house because they have kept one cow and sold a few quarts of milk. This child had what is diagnosed at the Chester Hospital as typhoid fever. I have asked permission to see the case with the physician in consultation, since it has a complication and has a history of having typhoid fever once before. There was also in this man's house a nuisance, which we have ordered abated both successive years, and I doubt if it ever was abated. The kitchen slops drain directly into the yard, and the cesspool is near the stable where the cow is milked, as you are well aware there is no such thing as a sewer in Tinicum Township.

August 22, I went to Lester to investigate at the H. house and find the following: They use Springfield water and have but one tap. The kitchen slops no longer drain into the side yard and form a puddle as before, but are thrown over into the garden, and it being sandy soil occasions no nuisance. I then investigated the milking place and find the cesspool is distant about ten feet from the milking place. The cesspool was not in bad order as they recently have been using lime, but after looking the situation over pretty carefully, it leaves but two theories, as to the cause of this consecutive typhoid in this one house. The first is that someone in the family is a "carrier." The second is that the proximity of the milking place to the cesspool permits of fly infection of the milk. The man has two cows

and sells about twelve quarts of milk a day. If the mother was a "carrier," I should think that we should have typhoid in this house at other than the height of the summer. If the milk is being infected, we shall also have the neighbors infected, except that the milk is bottled and delivered immediately. I admit that I do not see definitely what has caused this trouble, but I have had the cesspool filled in, and they are digging a new one in the far corner of the premises, distant about eighty or ninety feet from both the house and stable. The father, who is keenly alive to the danger in his family, will see to it that both earth and lime are freely used in the cesspool. The present arrangements for the sale of milk are as follows: The cows are to be milked in the open lot, well removed from both house and stable, in cans supplied to him by his patrons. But as soon as the new cesspool arrangements are completed, with your consent, I shall again permit the bottles to be washed in the house, unless you wish us to investigate the family for "carriers." I believe that they will co-operate with us, and we shall have no trouble in making this investigation, but it does seem very singular that we should have had but three cases arising at this place, considering the fact that he also has milk for sale.

September 20, in response to a telephone communication from the Health Officer I went to Springfield Township to inspect for typhoid on a dairy farm, where they serve some one hundred and forty quarts of milk daily through the towns of Sharon Hill, Glenolden, Clifton and Folcroft. The patient is a bookkeeper in the city, so that the source of her infection may have come from some place outside of the farm, but the important point to bring to your consideration is the fact that the patient was taken sick on September 4th. The case was diagnosed by a physician about the 8th, and the Health Officer informs me that the notice was mailed about the 15th, therefore, the disease has been running some sixteen days before we were able to throw any safeguard around the milk. I have arranged that the milkmen shall live separate and apart from the house, that the cans shall be washed at the spring house and that no one coming in contact with the house or its inmates shall have anything to do with the handling or sale of the milk. The excreta are to be disinfected and buried in a pit of adequate depth.

DIPHTHERIA.

There were not very many cases of diphtheria this year, and all the cases seemed to be sporadic and widely distributed. March 20, upon a telephonic communication from the Health Officer that there was diphtheria at a home in Newtown Township, I immediately went to the dairy farm to ascertain if the proper precautions had

been taken for the care of the milk. There was some delay in reporting this case, due either to miscarriage in the mails or some other cause, but I find that they had completely divorced the milk business from the quarantined house, since he in no way came in contact with the milking business and the cans were washed at the spring house, where another family was living. As the precautions seemed adequate I in no way interfered with their program.

Upon receipt of advice April 27, from the Health Officer that there was diphtheria in a house in Gradyville I went to the dairy farm yesterday to regulate the sale of milk, which was being delivered to a creamery. After some parleying, we arranged matters so that the hired man should sleep outside of the house, take his meals in an out-kitchen, and be the only one who handled the cans, cows and milk pails, until the period of quarantine had expired. Friday morning, May 6th, the Chester Health Officer informed me that he had received an ordinary postal card stating that there was a 13-year-old child on Keystone Avenue, Philadelphia, suffering from diphtheria, and he urged immediate removal to the hospital. Judging from the number, that it was in the neighborhood of Philadelphia, and as this Doctor was from somewhere in South Philadelphia as his postal was marked Southwark Station, I inquired of the Health Officer where this Keystone Avenue was, and sent him at once to investigate. He found that the case was in Upper Darby, that it was of three or four days' duration with a physician in attendance, but no placard on the door. He put a card on the door and I instructed him to notify the authorities of Upper Darby of his action, and to tell them that he did so with my authority. If they object to me going into their territory I trust you will confirm my action. In the mean time I shall try to find out whether or not the physician reported the case to Upper Darby. Somewhere there has been carelessness, and a few instructions from your office might help matters in the future.

November 6th, the Health Officer reported to me a case of diphtheria in Haverford Township, and asked for instructions. A physician had phoned him early in the day to take charge of the case. The reason of this haste was that the child had come to the physician's house by trolley car and the disease had extended so far that it was in his nostrils and the discharges were coming from his nose. I sent the Health Officer on Sunday morning to the car barns to have the cars disinfected. I found that every precaution had been taken to prevent entrance or exit of any persons, except those authorized by the Department.

December 9, on report from the Health Officer that quarantine had been broken in Media, I went to the house to investigate. The householder admits his defection, but did not realize that traveling

in his own cart was a violation of the law, and his trip to Media was simply to find out from the Health Officer how he could manage to dispose of some of his calves. As the man showed no spirit of defiance of the law, and had only broken quarantine through not fully understanding the quarantine regulations, I did not hesitate to let matters rest at that point, as I feel sure he will not break quarantine again.

SMALLPOX.

From January Until December Smallpox Prevailed.

January 21, upon information that the father of a patient suffering from smallpox in Philadelphia had been working at the Eddystone Plant of the Baldwin Locomotive Works, we went to the works and made the following report: "In response to your telephone message I made arrangements to vaccinate at Baldwin's, taking a physician and all the vaccine points I could secure. We had no difficulty at all in securing their co-operation, but they had a great deal of trouble locating the man above referred to. We finally learned that he had not been there since he called for his pay the last of the year. Still as the matter was so important, I did not feel justified in taking that report only, so I tried to get in communication with Dr. Cairn's office and the Municipal Hospital, to find out from them if he might have been in the Eddystone Works under another name or number. Eventually I got into communication with Dr. Cairns himself, and learned that he had not worked there since December 24th. In consequence I did not vaccinate."

There was one case of smallpox taken from one of the incoming ships and confined to the quarantine station at Marcus Hook about April 1st. Not long before there had been some cases in and about Wilmington. April 21, I ascertained through the Marcus Hook Board of Health of the presence of a case of smallpox in that borough. The proprietor of a pool room and barber shop was taken ill on April 16, and was diagnosed by the physician of the Quarantine Station as smallpox. Immediately, quarantine precautions were taken at the premises. Every one within two blocks of the house was vaccinated immediately, and all direct contacts were located. About this period I was notified. I went to Marcus Hook, inspected the case and found a very well marked frank case of the vesicular eruption, beginning here and there to umbilicate, clinical symptoms were very mild, but the rash is very profuse over the face, much less on the body, but quite marked on the palms of the hands. This man had no signs of vaccination on his body nor had his wife, but she was immediately vaccinated. This case has fine possibilities, since we have no way of tracing whence it came.

There was nothing further heard until May 13, when two cases of smallpox were reported in the near vicinity. Again all contacts

were vaccinated and we endeavored to make a complete house to house vaccination. Our third and last case occurred a couple of days later in the person of a colored man who had been vaccinated but two or three days before. None of these three cases had ever been vaccinated previous to this outbreak. May 19th, as per my verbal report to Dr. Hunt yesterday, I went to Marcus Hook, insisted upon a complete and thorough compulsory vaccination of Linwood and Marcus Hook, and confirmed the diagnosis on case of smallpox. I also ordered compulsory restraint of the colored girl and boy who were both inmates of one house, saw that a guard was placed on the house by the Commissioner of Lower Chichester Township, and ordered the Rockhill school closed. This was the end of the outbreak in Marcus Hook, and there was no further trouble until December.

December 7, I was requested by the physician to see a case in the West End of Chester with her, and immediately upon confirming the diagnosis I notified the President of the local Board of Health and he being out of the city, I notified the Secretary's office. Quarantine was established, and upon investigation we found that an older sister of the patient had had what was no doubt, varioloid. The sister was at the time working at the American Viscose Plant with some three hundred girls. The father and another sister worked across the street in the Chester Lace Mills. These were all ordered home and under quarantine. The minor details, such as following up contacts to grocery stores, etc., I leave out, but one of the children had been in the Thurlow school and I immediately went there and inspected all the arms of the children and those not having first class scars and those who had certificates of "no take" were promptly ordered home. The Health Officer was ordered to revaccinate, the school of course was closed and disinfected. The city physician then began the vaccination at the Lace Mill, and carried it out to a man with two exceptions. One who is now under guard, having broken parole; the other, a young girl. I then went to Glenolden and secured four hundred points, for the reason that I did not feel that I could afford to wait for the others that you had ordered and before the employees of the American Viscose Plant had disbursed that same evening, we had vaccinated 281, with but three or four exceptions, whose names were taken and since then some, if not all of them, have been vaccinated. A house to house vaccination had been ordered in the neighborhood of another case, but before this was well under way the doctor discovered a case of varioloid who lived in a nearby house, and had been attending the Thurlow school. The father of the patient also was an employe at the American Steel Plant, where there are some six or seven hundred employees. I gave Dr. N. your four hundred points, and he, with his associates, began

the vaccination at the Steel Plant, where by midnight last night, they had concluded without a dissenting one, some 700 vaccinations. The Thurlow school is closed and every one of the pupils has been ordered vaccinated. I inspected the two schools in Trainer and all those not having proper scars were ordered withheld from school until properly vaccinated. I did not think it necessary to disinfect the school as there have been no contacts in that neighborhood. I went to the Viscose Company where I concluded the vaccination of some twelve who had been out the day before. I also visited a girl reported ill, who had been vaccinated the day before. This however, proved to be a negative. I conferred with Dr. G. in regard to the further conduct of the affairs at the Silk Mill, he being President of the local Board of Health, and also in regard to the enforced quarantine of this girl, who lives at Marcus Hook.

December 8th, Dr. D. asked me to see a colored child with him who had been vaccinated three times without a "take." The eruption was well marked, but the case was clinically light. As she had been attending the Gartside School the day before, the physician had every one of the children revaccinated except one, who held out. A Miss M., who having been a direct contact with the case, was placed in absolute quarantine together with her entire family, who were in contact with a contact. We reasoned with Mr. M. long and without avail, and regretted very much closing his place of business, but it seemed there was nothing else to do. As this case was at least a mile away from the other cases at Clayton Street, without any other known line of inter-communication we could think of nothing but the trolley cars as possible common "carriers," and ordered that all cars used in Chester were to be fumigated. Those of the Rapid Transit Company whose barns are in Philadelphia were arranged for, and I called the Health Officer from Media to disinfect at the local barn, where some 35 cars are to be fumigated. Dr. E. arranged through the Mayor, who kindly lent every possible aid to rope off the neighborhood of a case at four o'clock this morning, and at six o'clock the twenty vaccination physicians began their work. By eight o'clock between 400 and 500 people were vaccinated without a single serious protest. The compulsory vaccination in Trainer and the section where smallpox first broke out, continues. We hope to have every pupil in the schools vaccinated by Monday night.

December 12th, I have very little to tell you about our smallpox situation in Chester. I think I have reported five cases thus far, and I heard at the Board of Health meeting last night that there was a third case in the house which we had roped off. This makes six in all. They are going to publish in a few days a report of the last epidemic, showing 569 cases with 59 deaths, running over a period of

four years, calling the attention of the people to the fact that the epidemic before began as it has this time, with a few cases, then a lull. A few months afterwards, some more cases and gradually it worked up in the course of a year to the full fledged epidemic. I think it would have been well to have sent the full file to our local newspapers for the last week or ten days, which would have given you some very good information, although I have tried to cover everything in my reports. I am not sure that I reported to you that part of Trainer has been gone over by the vaccinating physicians, and all have been vaccinated with the exception of six persons who are not giving us any trouble but who have not been vaccinated because of unavoidable delays. It was estimated last night that we must have vaccinated between 2,500 and 3,000 people, with but three objections. These have been handled without any trouble by our local authorities.

December 12th, we are still anxiously scanning every case of chickenpox, and I have requested the Board of Health of Marcus Hook, Lower Chichester, and Eddystone, that they do not accept the reports of chickenpox without having them investigated by a second physician for corroboration. If you sanction it, I shall make this a letter, signed with my name as a County Medical Inspector, and officially mailed to them.

December 14, we had one more case in the W. family, but we had no new outbreak of smallpox, and the epidemic was concluded with these W. cases making seven in all.

Statistical Summary of Work Done During the Year.

Forms 34 received,	232		
Forms 36 received,	199		
Cards 37 received,	186		
Examined cases alleged to be		Dairies inspected for	
Variola,	7	Typhoid fever,	4
Typhoid fever,	6	Diphtheria,	6
Scarlet fever,	22	Scarlet fever, .....	..
Varicella,	10		

ELK COUNTY.

Abstracts From Reports of Investigations of Alleged Cases of Communicable Disease During the Year 1911.

Dr. J. G. Flynn, C. M. I. March 10th, I was called to Portland Mills, Spring Creek Township, by the Coroner, who informed me that a woman had died suddenly after premature delivery preceded by sore throat. Investigation proved that diphtheria had caused her death. The whole neighborhood had been exposed, no physician being

in attendance on the woman, all the neighbors had been in and out, the children of the dead woman were cared for in various houses previous to the Coroner's arrival. The children having been to school the day previous to her death, I thought it advisable to have the school closed until the incubation period was over.

At the request of the Health Officer March 21st, I went to Horton Township on Sunday to see a young lady with a supposed case of mumps. She had come over from the Clarion Normal sick, and as there were several children of the family attending school the Health Officer did not want the disease introduced into the community and affect the school. But she refused to be quarantined unless the disease was diagnosed as such by a physician, and so he called upon me to come over. I went there and found it as he had suspected, that is mumps, and had him placard the house and keep the rest of the children from school.

May 29th, I went to Heck's Run yesterday to investigate reported typhoid fever outbreak. I found no typhoid there at present, and none since last winter, but there has been from 30 to 35 cases there in the past two or three years altogether. This, however, is in Cameron County, outside of my district.

Statistical Summary of Work Done During the Year.

Forms 34 received,	136	|	Dairy farms inspected for	2
Forms 36 received,	103			
Forms 37 received,	98			
Examined cases alleged to be			Typhoid fever,	
Typhoid fever,	2			
Scarlet fever,	2			
Diphtheria,	3			

ERIE COUNTY.

Investigations of Alleged Cases of Communicable Diseases for the Year 1911.

Dr. J. W. Wright, C. M. I. February 7th, at the request of a physician in North Girard, I visited that place and investigated a suspected case of smallpox, a careful examination of which showed the patient to be suffering from a severe form of multiple erythema. No quarantine being necessary, none was established. July 8th, at the request of a doctor from Girard I visited that borough to investigate a suspicious case of smallpox. A careful examination, however, showed the case to be aggravated chickenpox. No effort having been made by the local authorities to establish any form of quarantine in the case, they were directed by me to do so at once and a report made to the Department relative to their neglect to properly attend to their duties in such cases.

CHICKENPOX.

Under date of September 15th, I received a communication from the township Health Officer, in which he stated that chickenpox was said to exist in Globe school, Girard Township. I at once visited the said neighborhood and investigated a number of families where the disease was said to be present. Seven cases of the disease in six families, were found, in each of which quarantine was established. In this connection I also directed the disinfection of the school building and gave full instructions to the teacher regarding the future exclusion of children supposed to be suffering from this disease. Under date of November 16th, acting upon information received from a physician at McKean I visited a family in that township in which I found a case of chickenpox, a report of which had not been received by the Health Officer, it being a case in which there was no attending physician, I gave the necessary instructions for the establishment of quarantine.

SCARLET FEVER.

Under date of February 15th, the Health Officer reported the existence of a suspicious eruptive disease in a family living in Girard Township. Being unable to give the matter my personal attention, I appointed a deputy to make the necessary investigation. Upon receipt of his report to the effect that there were six cases of scarlet fever in the family, immediate quarantine was established by the township Health Officer. Under the same date a similar report was received regarding suspicious cases of the disease in Fairview Township, and for similar reasons, asked my deputy to investigate. His report of the examination showing the non-existence of any communicable disease, a report to that effect was made to the Department. Under date of March 14, I visited North Girard to investigate a report that a number of unreported cases of scarlet fever were existent in that locality, the investigation showing that the report was based on the fact that two families in which quarantine had already been established and had not been under a physician's care at the time of the appearance of the disease and had not been properly isolated until several days thereafter, my informant having derived his knowledge previously to the establishment of quarantine. Under date of March 23rd, information reached me of a suspicious case of eruptive disease existing in Girard Township near Platea. I secured the services of a physician to make the necessary investigation. His report showed that no communicable disease existed. October 6th, investigated a suspicious case of scarlet fever in Mill Creek Township, which upon examination was shown not to be a case of that disease, and no quarantine was established.

WHOOPIING COUGH.

March 27th, I investigated suspicious cases of whooping cough in two families residing in McKean Township. In one of these the patient had apparently fully recovered, and in the other, if the disease had been in existence, recovery had already taken place so that in neither instance was quarantine established.

TYPHOID FEVER.

July 14th, a case of typhoid fever located just outside the city limits in Mill Creek Township was called to my attention by the Health Officer. On investigation I found that the water used by this family was obtained from a shallow dug well located about 25 feet from the family water closet which was of the primitive, outdoor type, consisting of a hole dug in the ground with a shack placed over it, the hole being open to the ravages of flies and other vermin. I at once directed that the contents of the vault be removed, the hole thoroughly limed and filled, and the closet placed at the proper distance from the well. I also secured samples of water from the well and directed that it be thoroughly cleansed before its further use. Under date of September 8, I investigated three cases of typhoid fever located in different parts of Mill Creek Township. In this connection I desire to state that owing to the fact that a suspicion had arisen in my mind as to the probable source of infection being one of our local summer resorts, I requested Mr. F. to accompany me on making the investigation, also that I requested him to make a written report which you no doubt have received from him. The first case visited, a man about forty years of age, married, a total of six in his family, was taken sick about August 10th, exact date being uncertain, but the statement of his wife is to the effect that the first symptoms became noticeable about three and one-half weeks previous to our visit, which would bring the onset at about August 12th. August 2nd, the patient and his family had attended a family picnic at Waldameer Park, a summer resort about four miles west of the city limits, drinking water, eating ice cream and indulging in the usual pastimes of people at such places. No person suffering from that disease had visited at their homes nor had been with anyone whom they knew to be suffering from typhoid fever for more than one year before. The milk supply was obtained from their own cows. The well on the premises is a dug well located nearby the house about one hundred feet from the family water closet and about two hundred and fifty feet from the barn. The well was tightly covered with a tightly fitting stone cap and apparently could not be polluted in any way from outside sources. The vegetables used were of their own raising and had not been exposed in any way to fecal pollution beyond previously having been fertilized by barnyard manure that

had been previously plowed under. These conditions apply to the second family except that the well in this instance is a drilled well, eighty feet deep, located about one hundred feet from the closet and the barn, both of which are on an incline below the well. There are six persons in this family. These people too had been in attendance at the picnic above referred to, produced their own milk and had not been exposed in any way to anyone who had previously had typhoid, neither had typhoid fever ever occurred on the premises to their knowledge. The patient in this case was a child eight years of age, date of onset being rather uncertain, about August 15th to 20th. Referring to the first case, the wife of this man, a woman about 27 years of age, was also in attendance at the picnic above referred to, and absolutely denies having come in contact with anyone having had typhoid fever. She has, however, been in the habit of coming to Erie frequently and when here usually ate ice cream at a confectionery and drug store, also obtained her dinner in the city when making her trips to town. There are six persons in this family, none of whom have, however, had typhoid fever. In 1890 a visiting relative developed the disease immediately after coming to their home. This is the only case that has been known to exist on the premises. In all of these cases all discharges were removed to a distance and buried in a pit and were disinfected with a carbolic solution and liberally covered with lime. All precautions relative to dishes and other household utensils were rigidly observed. I was informed without having an opportunity to verify the statement that a number of persons, names unknown, who were in attendance at this picnic have had attacks of acute intestinal trouble which have not been definitely diagnosticated. In view of the fact that each of these cases had been at the resort above referred to on the same date, and drank from the water supply furnished by the Park authorities, have since developed typhoid fever, it was deemed advisable to have samples taken from the springs supplying this resort with water. In this connection I have been informed by our inspectors that persons recently suffering from typhoid fever in Erie have frequently visited this place. September 22nd, on receipt of advice from the township Health Officer, I visited North Girard and investigated a report that the Lake Shore Railway Company was in the habit of washing its work and cattle cars allowing the drainage to form an insanitary pool near the railway tracks in this village, also that their construction gangs who had their sleeping and cooking cars stationed near this point, had been depositing their wastes in such a manner as to cause a public nuisance, the whole being the possible cause of several cases of typhoid which had occurred in this immediate locality. That nothing might be left undone regarding the full investigation of this matter I requested the Department's representative who

was stationed there at that time, to accompany me. I presume he has made a report of the results of his inspection, but beyond the fact that the neighborhood was a filthy one in the sense that closets, chicken-coops, manure heaps and pig pens were closer to each other and neighboring houses than common decency permits, also that the ground is low and the wells are very shallow and depend partially upon surface water for their supply, no evidence of a local source of infection could be obtained. A portion of the Lake Shore tracks where the washing of cars, etc., was stated to occur, was in a most cleanly condition, and no evidence of any odor or pollution of any kind could be discovered. I am inclined to believe after making a careful inquiry into these cases, that they are largely if not wholly due to flies and the result of contact with persons who had previously suffered from that disease, and their attendants.

Statistical Summary of Work Done During the Year.

Forms 34 received,	174	Cases examined alleged to be	
Forms 36 received,	181	Scarlet fever,	2
Forms 37 received,	227	Varicella,	1

FULTON COUNTY.

Abstracts From Reports of Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

Dr. J. W. Mosser, C. M. I. As per instructions of the Chief Medical Inspector by phone today I had a patient with diphtheria removed to her father's home in Ayr Township, from which she had come on her way to Bellwood. I had both places quarantined. I will order disinfection of both premises at the end of the incubation period if they are then free from infection.

September 1st. Yesterday I was informed of a case of suspicious sore throat in Licking Creek Township. I investigated today and found the mother had diphtheria. I gave her and the rest of the family antitoxin.

October 3rd. I have today checked up facts in a case of typhoid fever at Houstontown. The child became sick September 1st, was sick about two weeks, with aching, slight hacking cough, diarrhoea, and temperature. September 16th, she came down stairs. She is now going to school. The child tore down the placard. These facts I got from the mother. While in that town I heard of a contagious skin disease in the school. I made an investigation and found two cases of impetigo. I excluded the children from school.

During December I investigated chickenpox in two families in Todd Township and four families in Ayr Township. As the children had been attending school I directed that the school be fumigated.

A son of Mrs. N. K. was taken from Todd Township to South Altona while ill with scarlet fever. I had the place fumigated from which the child was taken, and hope for no more trouble there.

After examining all the members of Robson Bros.' show, I found no evidence of sickness, but took the precaution to vaccinate all parties connected with the Company.

STATISTICAL SUMMARY.

Forms 34 received,	83		
Forms 36 received,	59		
Forms 37 received,	30		
Cases examined alleged to be		Dairy farms inspected for	
Typhoid fever,	1	Typhoid fever,	5
Diphtheria,	3		
Varicella,	17		

FRANKLIN COUNTY.

Report of Communicable Diseases During the Year 1911.

Dr. H. X. Bonbrake, C. M. I.

Typhoid fever,	92	Smallpox,	52
Scarlet fever,	61	Chickenpox,	32
Diphtheria,	63	Anthrax,	1
Measles,	22	Glanders,	1
Mumps,	7	Erysipelas,	2
Whooping cough,	1	Smallpox contacts under observa-	
Pneumonia,	1	tion,	20
		Tuberculosis disinfection on request	6

FOREST COUNTY.

Summary Report of Work Done During the Year 1911.

Dr. T. J. Bovard, C. M. I. This county has been singularly free from outbreaks and epidemics during 1911. The physicians and people show better disposition to respond to demands of the Health laws. Little work was done this year.

Statistical Summary of Work Done During the Year.

Forms 34 received,	43	Forms 37 received,	9
Forms 36 received,	15	One dairy inspected for scarlet fever.	

FAYETTE COUNTY.

Abstracts From Reports of Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

VARIOLA

Dr. O. R. Altman, C. M. I. April 12th. Made an inspection with Dr. G. H. R. to see suspected case of Variola in suburb of Uniontown. In consultation found a child, ten years old, suffering with measles. October 8th, was called in consultation with Dr. A. E. C. to see a suspected case of Variola in S. Union Township. The case proved to be Impetigo Contagiosa.

TYPHOID FEVER.

January 11th. Investigated a small epidemic of typhoid fever at Oliver No. 1, Fayette County, Pennsylvania. This inspection was made by order of Dr. B. Franklin Royer to ascertain the cause of six cases of typhoid fever in the above coal town. These cases were among the employees of the Oliver & Snyder Coke Company. The water supply being obtained from the Youghiougheny River, above Connellsville. The following homes were visited: Fred W., L. S., T. A., T. A., T. H., and M. T. The first named had typhoid fever and was being treated at home, the others had been sent to the Uniontown Hospital for treatment. Two specimens of water from each hydrant were collected and sent to Philadelphia. These reports were negative. January 28, I visited Oliver No. 1 with Mr. Emerson from the Department for the purpose of further investigating the water supply. We went over the conditions with the Superintendent, the second specimens were taken and sent to the Department. September 4th, I reported a small epidemic of typhoid fever which developed in the County Home. In consultation with the Physician in charge I made the following report: Two cases had been sent to the Hospital, two cases developed in the family of the Steward at the County Home, and on same day the Steward and his wife were both in bed with symptoms of the same disease. The man who had charge of the farm had three children with typhoid. Specimens of water from different parts of the County Home, which is supplied from an artesian well, were collected and sent to the Department for examination. These proved negative. September 5, I made a second visit to the County Home. All spigots were closed from the inmates, water was boiled for drinking purposes. The Poor Directors placed upon duty a trained nurse who took charge of the inmates. Second inspection of typhoid, several new cases had developed. The Super-

intendent and his wife both having typhoid. On this visit a thorough investigation of the dairy, which was composed of eight milking cows, took place. All cans and crocks used for milk were ordered to be thoroughly scalded before using. Inspection was made of the hog pens and other out buildings at the same time. A thorough inspection was again made of the kitchen. Could not trace any source of this trouble. However, the Poor Directors were making every effort to check the spread of the disease. At this time, 13 cases with the present suspected cases, had been reported. October 5th, I reported an epidemic of typhoid fever at Riverview and Masontown Coal and Coke Companies, two coal towns situated on the Monongahela River, one and a half miles southwest of Masontown. A number of wells and the reservoir which furnished water to the Riverview Coal and Coke Company were found to be infected with typhoid bacilli. These examinations were made by the Company through their laboratory in Pittsburgh. The infection of the reservoir was traced to the family of J. C., living a short ways above the reservoir on a small stream which was fed from a spring, the water being used by this family. Some 15 or 20 cases were reported at this time from these coal towns. An inspection and report was made on November 6th, regarding the typhoid in the family of H. B., one and a half miles southeast of Horner's Mill, in the locality of Normanville. November 20th, the third report was made concerning the conditions existing at the County Home. No new cases had developed and the third examination of the water supplies was found negative.

DIPHTHERIA.

May 18th. I was notified by the Department to investigate the conditions existing with reference to diphtheria in the townships of two Health Officers. The family of C. C. was released at the end of 14 days following the death of the patient. There were no others in the family to contract the disease. Four families were investigated concerning diphtheria and the card reports. July 6th, an investigation was made in consultation with Dr. R. of Upper Middletown, in the family of J. Y. house No. 6, Sunshine Works, Menallen Township; diphtheria was suspected in this family, but on investigation Mr. Y. was found to be suffering from follicular tonsillitis, which was followed by paritonsillar abscess. October 5th, I reported an inspection made at West Masontown where they had an epidemic of diphtheria. Ten cases were found in different consecutive families. One of the children attended school at Masontown and took sick while at school. Consequently the Masontown schools were closed. This case was traced to the West Masontown school where the first child developed the disease in school.

MEASLES.

February 10th. An inspection was made of the North Union Township schools at Lamont. Forty pupils were out of school on account of sickness. One child was found with measles at the home of M. K. Two other children were then found in two different families, and quite a number of families had been quarantined for measles previous to this time but no cases had developed in school, so school was allowed to go on. The Health Officer was ordered to make further investigation in families where children were found to be sick. I reported March 20th, and an inspection was made on March 18th at Continental No. 1. I visited and found 18 cases of measles in different families, and the houses placarded. On receipt of a letter received from the President of the School Board of the McClue School, Upper Tyrone, March 17th, I investigated and had the Health Officer placard three homes where measles existed with no physician in attendance.

Statistical Summary for the Year 1911.

Forms 36 received,	1702	
Forms 37 received,	1278	
Forms 34 received,	1857	
Cases examined alleged to be		Five schools ordered closed on account of measles.
Variola,	4	Forty-two health officers instructed at
Typhoid fever,	27	office and 15 elsewhere.
Diphtheria,	9	Stock transferred on 4 premises.
Scarlet fever,	0	
Measles,	27	

The above summaries have been taken from reports sent to the Department during the year 1911. Would say that this is only a brief report so far as the work in our district is concerned. The people are now educated concerning the laws pertaining to the quarantining of contagious diseases. It is an every day occurrence, by the use of the telephones, to be informed of various troubles existing in various parts of the County. With few exceptions the physicians report promptly. This being a community thickly populated by the foreign element at times makes our work complicated. We are, however, overcoming the ignorance of these people and they are becoming alarmed when sickness develops in their families. I have endeavored to make this work educational and have interested many organizations to assist in the various improvements in this work. Would state that people in general are gradually showing their appreciation of what the Department of Health is doing for them in this line. So much is expected from this Department that sickness in any form, that develops in our county is brought to our notice. It is our aim to still improve the work of the Health Officers, as well as educate the people to become more interested in the good health of their community and people.

GREENE COUNTY.

Abstracts From Reports of Investigations of Alleged Communicable Diseases During the Year 1911.

TYPHOID FEVER.

Dr. J. T. Iams, C. M. I. During the year ten cases of typhoid fever were reported by the Doctors and Health Officers of Greene County. In no instance was the County Medical Inspector called upon to visit the cases. The routine work of the Health Officer has been carried out so carefully that no epidemic or spread of typhoid has been traced to any preceding case except in one instance where the disease attacked another member of the same family. No occasion arose in which the County Medical Inspector was called upon to inspect any suspicious Dairy Farms for any disease whatever.

DIPHTHERIA.

September 8th, information was received from School Teacher, School Board and the Health Officer that diphtheria had broken out in the public school in Richhill Township. The County Medical Inspector immediately ordered the school closed and diseased patients quarantined. Three cases marked the limit of the trouble, and after a period of thirty days the school having been thoroughly disinfected, was reopened. No further cases developed in that district. During the year six other cases of diphtheria, making a total of nine, were reported by the Health Officer but no investigations were necessary on the part of the County Medical Inspector, each case being carefully quarantined and disinfected by the respective Health Officers.

SCARLET FEVER.

June 26th, one case of scarlet fever was reported by the Health Officer of Richhill Township. No orders were asked of the County Medical Inspector, but the case was controlled in the usual manner and no further cases developed.

MEASLES.

Five cases of Measles were reported by the Health Officer of the various districts during the year, but in no instance did any secondary cases of the disease arise.

PNEUMONIA.

Five cases of pneumonia were reported to the County Medical Inspector. No trouble arose in any of these instances.

One case of Pertussis was reported during the year.

GENERAL REMARKS.

During the past four years Greene County with its system of County Medical Inspector and seven district Health Officers has been gradually growing into the Team-Work idea of working as nearly as possible in close harmony, a sort of Medical Unit aiming to routinely investigate every suspicious case, report every careless physician who thinks it too much trouble to drop the Health Officer a card of information, quarantine thoroughly even though Officers were at first necessary to enforce both the quarantine and the subsequent disinfection. We have no Factories nor Mill Districts, no closely-crowded foreign element to contend with so that our work of teaching is more simple and each lesson taught bears good results. The people of this county are now so familiar with our methods that in many instances our first intimation of diseased families will come through Laymen who have the work very much at heart. These reports are not even in the spirit of criticism, but charitable support.

In closing this brief report, I wish to call attention to the increased care among our Physicians with respect to reporting all Communicable diseases, and their added interest in the advancement of the work being done by the State Commissioner.

Statistical Summary of Work Done During the Year.

Forms 34 received,	35	Cases examined alleged to be	
Forms 36 received,	26	Typhoid fever,	7
Forms 37 received,	23	Diphtheria,	5
		Scarlet fever,	1
		Measles,	5

HUNTINGDON COUNTY.

Abstracts from Reports of Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

TYPHOID FEVER.

Dr. H. C. Frontz, C. M. I. September 21. On receipt of card report that B. L. S., of Smithfield Township, had typhoid fever, and that he was a retail milk dealer, I visited his home, found that he secured milk from four different farms, but that he does not drink milk at all, and found no evidence that it came from milk. He had already secured a farmer to take care of the business, who resides away from his residence, and also

learned that the milk cans are cared for by a woman three houses away, and that there is now none of those associated with the case having anything to do with the milk.

On same date I also received card report from the Health Officer in Spruce Creek Twp. reporting that Mrs. I. C. S. has typhoid fever, and that butter is sold from the premises. Visited the home of M. E. S. yesterday morning and found that Dr. C. S. and wife are living there temporarily and in charge of the case, and taking all precautions relative to disinfection. Those having charge of the milk and butter are keeping away from the sick room, and have nothing to do with the patient. So allowed the sale of butter to go on. This case probably originated at her father's home, there being some suspicion about drainage into a well, and I have already asked for a container to be sent to have well water examined.

DIPHTHERIA.

November 26. Was informed by a physician of Robertsdale that E. F. of Wood Twp. had died of diphtheria on the evening of November 24, and that on the morning of November 26, at 7 o'clock, she was buried by an Undertaker of Broad Top City, and that he had six young girls act as pall bearers at the grave. Body was carried from the house to the hearse by Mr. W. and Health Officer H. I at once ordered Health Officer H. to quarantine the six girls for a period of ten days, and Dr. B. to give each girl an immunizing dose of anti toxin, which was done.

November 27. Dr. B. phoned me that there was another suspicious case in the immediate vicinity, and that people were disregarding the quarantine. Then thought it wise to visit Robertsdale and Woodvale in Wood Township which I did the next day. We examined a suspicious case at Woodvale and without any difficulty confirmed the diagnosis of diphtheria in a three year old child. Premises were quarantined at once. Saw two or three of the girls that were quarantined as pall bearers, and their parents were much distressed at the outcome. They said that it had been the custom to do things that way up there. From what I could learn and observe about conditions, felt it would be a good thing, and have a good moral effect upon the community, to have the State Constabulary patrol the section while the quarantine was on. Ordered the churches and schools in Woodvale closed until it was thought advisable to open again. Department asked the Captain of the State Police to request his men stationed at Robertsdale to pay strict attention to quarantined properties near Woodvale on their patrol.

SCARLET FEVER.

February 18. Received phone message from the Health Officer that a case of scarlet fever existed in Warrior's Mark Twp., and that

butter was sold from the premises. Visited the place on Sunday afternoon and found the case properly isolated in the upper part of the house in charge of mother. Rest of family were in another part of the house. Dairy consists of seven cows. There was no way of having someone away from the house care for the cows or make the butter, so ordered discontinuance of the sale of butter until premises were disinfected, which was willingly consented to. Received verbal reports of the disease existing in two other families who called no physician. One family denied having had any skin disease or breaking out, and I could get no positive evidence of its existence in the family.

The other case was a school teacher in Warrior's Mark Twp. There was a history of two children in the house where the teacher lived, having had a red rash on the body two or three weeks before, and were only sick a couple of days. Examined three year old boy who had a rash on his body, which I diagnosed as a mild case of scarlet fever. Directed the Health Officer to quarantine the house, also told him to have the School Board fumigate the school where the teacher had taught, the teacher to put on other clothes and go to another house to board and remain away from school for ten days. The schools had already been fumigated and precautions taken.

August 7. Had a communication from the Health Officer reporting two cases of scarlet fever in Spruce Creek Twp., milk being sold on the premises. I visited the home next day, found the house properly quarantined with the mother nursing the two children that were sick. One other child in the house was suffering with ivy poisoning. The father and two other children were living in the barn and keeping entirely away from the house. Found they had two cows and sold milk, and that already he had a neighbor take charge of the milking and milk. In view of the fact that two of the children in the barn had been exposed and might still contract the disease, directed him to have cows kept at neighbor's stable, and then milk could be used. This he willingly consented to do.

October 16. Health Officer of Baree Twp. phoned that there was some scarlet fever in Charter Oak and vicinity; I went there and was met by Health Officer K. and investigated the places suspected. The case of J. K. age 9 years proved to be scarlet fever. Also found child age 10 years in another family had a mild attack of the disease. No physician had been called and the child had almost recovered. Ordered the Health Officer to quarantine the case. At the same time two other children were suffering with Impetigo Contagiosa. Instructions were given to take all necessary precautions where the disease really existed. October 24. Visited another dairy farm where the son had scarlet fever. Milk from eight cows was being sold to

an Altoona party. Allowed them to continue the sale of milk providing the father who lived about 300 yards away on the same farm, would look after the milking, and anyone handling the milk would remain away from the infected people.

MEASLES.

Sunday afternoon January 1, Dr. Hunt, Associate Chief Medical Inspector called me by phone and asked for information relative to a case of measles in the Presbyterian Hospital, Philadelphia, and was brought to Huntingdon before the quarantine period had expired, without permission from the Health authorities in Philadelphia. At once I went to see the Secretary of the Huntingdon Board of Health who said the case had been quarantined at 5 P. M. December 31st, 1910, on information received from the Chief Medical Inspector of Philadelphia, at 4 P. M. December 31st. I then learned that the father had brought him from Philadelphia to Huntingdon in the drawing room of the Pullman car P. R. R. train No. 45 on December 30, 1910.

Mrs. G. N. of Huntingdon R. D. No. 3, Henderson Twp., reported that her daughter was suffering with measles and they had no physician. The Health Officer quarantined the premises and I visited the home promptly and confirmed the diagnosis of measles.

CHICKENPOX.

January 19. Went to a home in Entriken, Lincoln Township, to confirm diagnosis of chickenpox made by the father and the Health Officer, and I found the diagnosis correct. Also found his three other children suffering with the disease. January 18, went to another home in same town and township with the Health Officer to diagnose a case of suspected chickenpox in a four year old child. No doctor was in attendance although the child had the disease four weeks previously. It had recovered and the 21 day quarantine period had expired a week before I directed the Health Officer to fumigate the house.

January 29. Received report of a case of chickenpox in Lincoln township diagnosed by the father and Health Officer. Found the diagnosis correct.

February 5th. Received telegram from Hon. Samuel G. Dixon, Commissioner of Health, Harrisburg, requesting that I get in touch with the Board of Health of Three Springs, for the purpose of establishing proper regulations for chickenpox. Accordingly phoned and gave directions about quarantine, and advised if necessary I would come down. He phoned me later in the day he would get along all right. Kept in touch with conditions by phone every day or two and on February 21st, was assured that everything was going along

satisfactorily. On the afternoon of the same day I was again informed that some of the families were not observing the quarantine, and that there was no co-operation on the part of the School Board and one member of the Board of Health and asked me to come down. Was not able to go until the following morning. Met the Board of Health and some citizens and found some factional trouble and some personalities had developed, and that Board and Health had not carried out strictly the instructions and that there was very little co-operation of the School Board with the Board of Health. Read and explained the law and directed them to carry it out, although I believe they will do so, the censure that the Board of Health is receiving from some prominent citizens, will, I am afraid, cause a majority of the Board to resign, and if so will be difficult to get five men in the borough to serve as Board of Health. The town is handicapped in not having a physician in the place, the nearest being Orbisonia, six miles away.

MUMPS.

February 26. Went to Spruce Creek to confirm Health Officer's diagnosis of 3 cases of mumps in Spruce Creek township. Found the diagnosis to be correct in each case. July 23, went to McConnellstown and confirmed the diagnosis in two cases of mumps, in Walker township, no physician was in attendance. June 27, also found another case of mumps in McConnellstown, no physician in attendance. Quarantine period had expired. I directed the Health Officer to fumigate the house.

WHOOPIING COUGH.

Received word from the Health Officer that whooping cough existed in a family in Warrior's Mark township, but they would not allow quarantine. I went there to investigate and found three of the children suffering with whooping cough. The house was promptly quarantined.

Statistical Summary of Work Done During the Year.

Forms 34 received,	271		
Forms 37 received,	268		
Forms 36 received,	202		
Cases examined alleged to be		Dairies inspected for	
Scarlet fever,	7	Typhoid fever,	2
Varicella,	4	Scarlet fever,	3
Measles,	1	Diphtheria,	1
Mumps,	7		
Whooping cough,	3		

One borough investigated on account of epidemic of scarlet fever.
 One school ordered closed.
 Stock transferred on one premises.

INDIANA COUNTY.

Abstracts from Reports of Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

SCARLET FEVER.

Dr. Wm. A. Simpson, C. M. I. February 2, being informed by a doctor of Rossiter, Canoe township of the existence of ten cases of scarlet fever which had developed during the past ten days at Rossiter, I accordingly reported to the Department and received a telegram followed by letter requesting me to make full investigation. I visited the place and found in all eleven cases properly quarantined and apparently obeying the rules of quarantine. I learned that a family had an undiagnosed illness prior to this epidemic. The history I obtained was that one of their children had had sore throat with a rash. Three other children were afterward ill, but no history of a rash was obtained. No doctor had been called to see them and the children continued to attend the schools. All of the eleven cases could be traced directly or indirectly to this family. The school was closed and fumigated and all of the cases were placed under quarantine. The Doctor told me later that the situation immediately improved and the epidemic rapidly subsided.

CHICKENPOX ALLEGED TO BE SMALLPOX.

May 25, a physician of Burrell township telephoned me that he had a case which he thought was smallpox, and the same day I visited the case with him. The patient was a preacher 46 years of age. He came to Black Lick from Jeannette on May 15th, and was then complaining of sore throat and general muscular aching but had not been chilly. On the 19th, he sent for a doctor who found him with a temperature of $102\frac{1}{2}$, back-ache, severe head-ache and tonsilitis. On the 20th, he was much improved and about the house. On the 24th, 9 days after his arrival from Jeanette, he called at the doctor's house and left word for the doctor to call at his home. He said he was feeling all right and the doctor found his temperature and pulse normal, but an eruption appeared over his entire body. The appearance of this rash alarmed the doctor and he sent for me. Upon visiting the premises I found the patient working about the house, temperature and pulse normal, but he was covered with an eruption which in appearance resembled smallpox. The mild nature of the constitutional symptoms and negative history and the varying stages in the development of lesions, were the strong points which

led me to diagnose the case as one of chickenpox. I advised Dr. B. to placard the premises as chickenpox and to observe the case closely and to report to me any new cases.

TYPHOID FEVER ALLEGED TO BE CHOLERA.

February 22, I received a phone communication from a physician in Islen, Young township of the existence of a number of cases of suspicious cholera. I informed the Department by phone and received instructions to investigate immediately. I went there and saw eight cases with the doctor, all of these cases had occurred since February. Two cases (a man sick ten days and a woman sick eight days) had died prior to my visit. The eight cases I saw had symptoms similar to the two dead cases. All these cases occurred in a set or a clan of Italians, and a history was almost impossible. The symptoms of the cases were about as follows; Illness began with diarrhoea which was extreme and was accompanied with severe cramps and vomiting and shock. Stools were profuse, watery and had particles of mucus. Abdomen was retracted and not tender and spleen not enlarged; great thirst and suppressed urine. Temperature was sub-normal and evidence of cardiac weakness was present in most cases. The two fatalities were from cardiac failure so Dr. Cramer informed me. One of the cases was a pregnant woman who aborted before the fatal termination; another pregnant woman aborted but made a recovery. Two of the cases I examined presented the appearance of very sick individuals. The remaining cases (six) were not as yet in an alarming condition. These cases presented almost a typical picture of ptomaine poisoning, but no history could be elicited so I looked upon the cases resulting as typhoid infection, in other words, an abnormal form of typhoid fever. Specimens of dejecta were sent to the Department Laboratories for examination. The cases were isolated. The doctor had been most careful with the vomit and stools and all the sick rooms were well supplied with a liberal amount of chloride of lime and all had been carefully instructed to boil drinking water. The town water came from a small stream the purity of which can always be questioned as it collects considerable surface drainage. I looked on the above cases as typhoid infection but kept in close touch with the situation until I received the Laboratory reports.

P. S. Some months after the above epidemic had disappeared, I learned from the Health Officer that he had obtained a history from some of the Italians that a shipment of cheese had been received from Italy just prior to this epidemic and that the cheese had been distributed to friends or a certain set or clan of Italians. This history, although coming late, might explain the above symptoms as cases of ptomaine poisoning.

Statistical Summary of Work Performed During the Year 1911.

Forms 37 received,	496	Cases examined alleged to be	
Forms 36 received,	422	Scarlet fever,	11
Forms 34 received,	615	Typhoid fever,	8
		Varicella,	1

JUNIATA COUNTY.

Abstracts from Reports of Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

Dr. W. H. Banks, C. M. I. April 10, was called to see a man aged 76 living in Fermanaugh township, and found that he had smallpox. The rash was well formed on the face and neck and spread rapidly over the entire body. A week later, his wife aged 74, also developed the disease. I learned that about two weeks before, they had visited at the home of their son in whose family there had been sickness of a similar nature which had been considered chickenpox. I immediately looked up and vaccinated all the persons who had visited the man first mentioned, and I also visited the home of their son and secured a list of contacts during their sickness, vaccinated as many of them as possible and kept them under close observation. I learned that the son above mentioned, and his family, had been on a visit to Virginia and had come in contact with several cases of what was considered chickenpox. Subsequent investigation showed that it was smallpox and that it had been brought to the Virginia home by a visitor from Missouri. Only one other contact in the son's home developed the disease and he in turn gave it to three of his family. All of these homes were carefully quarantined and the disease did not spread any further.

In the early part of this year an interesting house epidemic of typhoid fever occurred in a home in Milford township. Eight cases developed in quick succession and the source of the outbreak was so securely hidden as to elude the careful and painstaking investigation made to unearth it by Dr. Hunt of the Department of Health. In addition to services in the above mentioned cases, there were frequent instructions given to Health Officers in some of the duties belonging to their work.

Statistical Summary of Work Done During the Year.

Forms 34 received,	93	Forms 37 received,	57
Forms 36 received,	56		

Seven cases examined alleged to be Variola, and one scarlet fever.
 Stock transferred from two premises.
 Sale of milk stopped on two farms.

JEFFERSON COUNTY.

Abstracts from Reports of Investigations of Alleged Cases of Communicable Diseases from September to January 1912.

SCARLET FEVER.

Dr. S. Meigs Beyer, C. M. I. October 10th, I was called by telephone by Dr. C. N. of Big Run, reporting what he believed to be scarlet fever. He also mentioned a number of other cases, which had already been reported, but were not under quarantine and no physician had been called. He asked that diagnosis be confirmed and that quarantine be established in the suspected cases, the public schools having been subjected to repeated dangers in his opinion. October 11, I visited Big Run with the doctor and confirmed the diagnosis and quarantine was established. I found that the children from the family were in attendance in the public school at the time, therefore, ordered the school closed and thoroughly fumigated. I visited a number of the homes in the vicinity where suspected cases were thought to be. In each place I found cases in various stages of the disease from the acute symptoms to late desquamation. In all of these cases proper quarantine was established and careful instructions were given. I also visited several homes from which the presence of the disease had been properly reported and urged strict attention to quarantine procedures. At four places I found cases comparatively over the acute illness but no physician in charge and not reported. These cases I placed under quarantine and proper inspection from time to time by the Health Officer. Following this inspection but two new cases developed in the borough of Big Run and I believe the epidemic was successfully stamped out.

TYPHOID FEVER.

October 7, received card form from the Health Officer reporting four cases of typhoid fever in Oliver township in one family. He also reported that the head of the family was of unsound mental condition and that the home was in a very insanitary condition as well as the water supply and general surroundings. I instructed the Health Officer to bring the matter to the attention of the county authorities, who authorized the removal of the patients to the Punxsutawney Hospital. Proper sanitary measures were carried out under the instructions of the Health Officer.

DIPHTHERIA.

Under date of October 25, it was brought to my attention by the School Board of Conifer and by the Health Officer in that district that an epidemic of diphtheria existed and quarantine was appar-

ently being very poorly observed. Also that physician in charge of the greater part of the cases was lax in his treatment of cases and that he had granted certificates for admission to school within ten days after they had been quarantined for diphtheria. Under date of October 26, by the sanction of the Department I investigated the general situation in Conifer and found that during the month of October from the 7th to the 24th, there had been 22 cases developed within this district and that quarantine regulations were very poorly observed, due largely to the unwillingness of those placed under quarantine to co-operate with the Physician and Health Officer. A large number of the homes were visited by me, the diagnosis was confirmed in a number of cases where doubt seemed to exist in the minds of the parents. In each case special instructions were given as to the nature of handling the disease and that a careful quarantine be observed. The school was closed for a period of two weeks, the building fumigated, as were some of the small outlying school districts which were involved, these were ordered closed and fumigated. Difficulty was experienced among the foreign quarter because of the inability to make the necessity for quarantine understood. Situation improved for a time. It was necessary for me to again visit the district under date of November 8th. At this time two new cases had developed. One room of the school having again been opened to infection. I ordered the school closed and fumigated. In this epidemic I had the hearty co-operation of the School Board and staff of teachers.

Under date of October 19, the Health Officer of Oliver township complained to me of a locality which apparently has a common source of infection of typhoid, there having occurred since 1902 nineteen cases and a number of deaths. In a letter of same date I instructed him to furnish me with the names of those suffering from the disease, together with a sketch of the water shed, location of farms, drainage, etc. This report I submitted to the Department under date of October 16. The Department sanctioned an investigation in this district and I instructed my Health Officer to go from house to house and thoroughly investigate any source of infection and put the community in a sanitary condition as far as possible. He later reported to me of causing the abatement of a number of vaults, stys, and other sources of infection which were a source of contamination of the water supply in the district. Since this cleaning up I have had no report of a single case in this immediate vicinity.

SMALLPOX.

Under date of November 4, I was called by phone by Dr. J. K. of Brookville, reporting R. F., Knox township suffering from what he believed to be smallpox and I called the Department by phone and

they sanctioned an immediate investigation. The Health Officer reported that he had quarantined the suspected case. I investigated immediately and confirmed the diagnosis of smallpox, found that the children had been in attendance at the McAninch School. In this home I found seven cases, all of which were immediately vaccinated, and proper quarantine measures established. I found that the patient had been visiting at the home of a neighbor on the night of the 8th, she had spent the night with her seatmate who was suffering with severe sores of the scalp, and on the night of October 12 the seatmate returned the visit to her home. On investigation I found no signs of the disease whatever in the seatmate. The patient took sick October 23d, attended school until October 26, at which time the teacher excluded her from school because of a rash on her face and hands. The physician was not called until November 2nd, at which time he pronounced the disease smallpox. The school was closed on this date, but the conditions were not reported to me until November 5th. I visited the home of every pupil that had attended school, including the teacher, and examined each carefully for any trace or history of exposure to any disease having any resemblance to smallpox, and found absolutely no trace of any possible direct contact in the community. I deputized Dr. S. to assist me and we vaccinated the teacher, all primary and secondary contacts who had not previously been vaccinated within five years. The teacher furnished me with a list of all pupils in attendance in her school and these were all vaccinated by myself or Dr. S. as well as other members who were in contact with these pupils. So far no source of primary infection had been found. It is interesting to note that the school books used in this school have been rebound during the past summer and this may have been the source of infection. This district in the past five or six years was the scene of an epidemic of smallpox. I advised the Secretary of the School Board and insisted that the copies of the books used by the patient, her seatmate and sisters be destroyed and suggested that all text books in use at the time be destroyed. The teacher advised me that there were several unvaccinated pupils in school during the time the patient attended school. These have all been vaccinated. Eighty primary and secondary cases were vaccinated under date of November 9th, three cases of smallpox promptly developed among the children of the same family. On investigation I found these cases to be very mild, all of whom were in direct contact, no attempt at isolation had been made early in the disease. These late cases proved very mild, due I judge, to the intercurrent vaccination during the period of invasion. In this epidemic no other cases developed. No definite source of infection could be ascertained other than the probability of the rebinding of the school books which may have been done by someone who had the

disease recently or that the books may have contained infected material from past infection of the epidemic of several years ago.

SCARLET FEVER.

Under date of November 16th, I was called by phone by a Health Officer relative to indefinite outbreak of disease supposed to be scarlet fever in Pine Creek township, Belgium Town. The Department under this date sanctioned investigation. November 17th, I visited this district and found that a number of children had been suffering from scarlet fever and that in the majority of cases no physician had been called and that school house had been repeatedly infected and that no quarantine regulations were being observed. I visited the entire school district and learned from the teacher of all pupils who were absent from any cause whatever. Visited their several homes and in a number of cases found members of the family suffering from scarlet fever, some in very acute stages and desquamating, and still others suffering from complications. In every case I established quarantine and closed the school, which was thoroughly fumigated. Recommended the destruction of books and advised that the family physician be consulted in each case. I met with hearty co-operation of the School Board and believe that every measure was taken to suppress the epidemic.

TYPHOID.

Under date of November 22nd, received letter from this Department, relative to three cases of typhoid fever from Philadelphia, with history, that three cases had been visiting at Dayton, Pa. from September 15th and November 8th, and while there, a member of the family in the last residence had developed typhoid fever with the request that I investigate the reason of these cases being ill from no apparent common source and that measures for its abatement should be instituted. November 23, I investigated the source of trouble and found it to be the water supply, in use by probably 50 families, with no other cause in the vicinity. Its use by so large a number of persons makes it seem improbable that this was the source of infection. I personally ordered the destruction of effluvia and liberal use of lime in outbuildings. I am of the opinion that the children contracted the disease from some common source, probably from food stuffs delivered by hucksters in this community.

Under date of December 16, received letter from the Health Officer in Knox township relative to vaccination ulcer in a child that was vaccinated by a deputy during the outbreak of smallpox in the district. The child had been daily under inspection and following examination the family requested that I should inspect its condition, which they believed to be serious. Under date of December 20th,

I found that the arm was not swollen nor inflamed but that the repeated separation and detachment of the scab, which had been occurring, had stopped and the sore was in a very healthy condition. A careful history of the case was taken in writing and filed with the Department.

December 9th, I gave instructions to the Health Officer of Pine Creek Township relative to lifting quarantine on cases in Belgium Town epidemic. Instructed the Health Officer what should be done and appointed a deputy to carefully inspect cases before the quarantine was raised.

Statistical Summary for the Last Three Months of 1911.

Examined cases alleged to be		Whooping cough,	2
Typhoid fever,	24	Smallpox,	4
Scarlet fever,	42	Chickenpox,	4
Diphtheria,	55		

Sale of milk stopped from 4 premises.

Four schools ordered closed. Reason, Scarlet Fever and Smallpox.

Ten Health Officers instructed at office, five elsewhere.

Eighty children vaccinated at expense of Department.

Two investigations of borough epidemics.

One drainage complaint investigated.

Twenty polluted springs investigated.

LACKAWANNA COUNTY.

Abstracts from Reports of Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

POLIOMYELITIS.

Dr. J. C. Reifsnyder, C. M. I. Two cases of alleged Poliomyelitis occurred during the year. Both of these cases were investigated and blood sent to the State Department of Health Laboratory. It is worthy of note, however, that both of these cases were preceded by history of sore throat.

TYPHOID FEVER.

August 20th, investigated a case of typhoid fever near Gouldsboro, Springbrook Township, finding a well developed case of typhoid fever. The Scranton Water Company had arrived on the scene even before I did, and placed a nurse in charge. Saw that quarantine was observed and made arrangements for a thorough disinfection, as well as having all refuse from the house burned.

SCARLET FEVER.

October 24th, I reported to you recently of scarlet fever in the A. family, Ransom Township, and later forwarded the Health Officer's letter, asking me to go there. Owing to the inaccessibility of the place which is reached from Scranton by way of Clarks Summit, Newton and Milwaukee, 20 miles, and the almost impassable condition of the roads on account of continuous rains, I attempted to

deputize Dr. N. of Newton Township, an old Health Officer, and the only doctor in the neighborhood to see the case. Then I was called on the phone by the Doctor himself and asked to go and see the case with him. He diagnosed four cases of scarlet fever, stating that the people refused to accept his diagnosis and would not observe quarantine. This was 3 o'clock Saturday afternoon, and I again started for the scene in my automobile. It was a most difficult trip, taking some ten hours. On my way I picked up Health Officer H. at Milwaukee, and reached the house at 5:30. The case was undoubtedly scarlet fever, and the family not observing quarantine. By threatening a guard and arrests, I impressed the family with the necessity of obeying instruction, and left after installing modified quarantine, with the Health Officer watching the case daily. The place was most insanitary and a clean up and disinfection planned. Cattle in the barn were moved to a neighbor's barn and I think there will be no difficulty in carrying out the law. I called to see the doctor on my way home, who seemed to think that the Department's firmness will have a wholesome effect in the townships of Newton and Ransom. This case was on a farm three miles in the hills south of Milwaukee and probably some seven or eight miles from Scranton as the crow flies.

ASIATIC CHOLERA.

During the year slips were received from the Commissioner of Health relative to certain contacts of Asiatic Cholera, from the southern part of France. These cases in each instance were inspected for a certain period and no suspicious case developed.

Statistical Summary of Work Done During the Year.

Forms 34 received,	34	Cases examined alleged to be	
Forms 36 received,	34	Scarlet fever,	4
Forms 37 received,	28		

One dairy farm inspected for scarlet fever.

LAWRENCE COUNTY.

Abstracts from Reports of Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

DIPHTHERIA.

Dr. J. D. Moore, C. M. I. August 11th, upon request from Dr. B. F. Royer, Chief Medical Inspector I found five cases of diphtheria in the Italian settlement called Brier Hill, Mahoning Township, these all in separate homes. Every precaution is being taken, and upon inquiry from Father Rocco I learn that he has taken special care and interest with his people in the way of instructing and advising them as to the importance of sanitation, isolation, quarantine and disinfection, and

general precautions necessary to prevent further spread of the disease. Their main trouble is that they seem to have no fear of the disease.

Acting on your request of October 8th, I made a trip to Wampum to investigate diphtheria in that borough, and I found conditions very good, having learned through the Board of Health that only four cases have developed from January 1st, until October 8th. These four cases occurred in three different families, so you will see there is no cause for alarm. All cases have been quarantined, and all rules and regulations complied with. October 16th, however, two new cases developed in the borough, but everything is being taken care of and attended to properly.

SMALLPOX.

Acting upon a suggestion from the Department January 9th, I made a personal examination of a smallpox suspect, which, however, proved only to be a case of Impetigo. You may rest assured there is positively no smallpox there.

MUMPS.

November 7th, after inspecting reported cases of mumps in North Beaver Township I diagnosed two cases in one family.

TYPHOID FEVER.

February 2nd, through Dr. Tucker, whom I deputized to investigate a case of typhoid fever which he diagnosed, after which the patient died, all precautions were taken as required by the Department.

Statistical Summary of Work Done During the Year.

Forms 34 received,	313	Cases examined alleged to be	
Forms 36 received,	228	Typhoid fever,	1
Forms 37 received,	209	Diphtheria,	4
		Varicella,	7

LANCASTER COUNTY.

Abstracts from Reports of Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

Dr. J. L. Mowery, C. M. I. April 30th, a phone message from a physician inviting me to inspect a case of smallpox just developing in the Borough of Mt. Joy asking my assistance with him in the confirmation of the diagnosis and also with a view of fixing a complete isolation of the case asked for by the Board of Health of said Borough. I promptly visited the premises with the doctor and found the case had just returned home from a small town in Georgia where smallpox existed, he

having sickened on his way home coming by train via York to Rohrerstown where he transferred to trolley homeward. I at once directed the Traction Company to have the said trolley car disinfected and also notified the P. R. R. Co. to have the coach in which he rode disinfected and all precautionary measures strictly carried out, which was promptly done. The quarantine was absolute. The case recovered without secondary developments.

TYPHOID FEVER.

Having received the report of typhoid fever developing upon several premises in Lancaster Township, 3 in number, in rather close succession and confined to a certain district, I thought it well to make a personal investigation which I did in company with the Health Officer, and after going over the various premises, found they were situated upon a limestone strata covered with a clay underground subsoil which softens and becomes rather pasty when dug up. I learned that night soil had been deposited upon various premises close by the north and west boundaries, said soil being delivered from the various privy vaults from Lancaster City. One premises in particular, a farm adjoining the fever infected district has had soil deposited upon its surface for a period of several years, and upon visiting said premises, I found quite a good deal lying upon the surface, not being composted or ploughed. I directed the same to be done, and also issued orders that no more could be received upon said premises while care was not taken. I also had ordered a sufficient number of bottles for the sampling of water from the various infected premises as well as the premises lying contiguous thereto. During the year I inspected three dairy farms in Penn Township for typhoid fever, two farms in Clay Township, two in Colerain, one each in Manor, Mt. Joy, Donegal, Warwick, Ephrata Townships, where I was obliged to establish the necessary precautions in regard to handling of milk products.

DIPHTHERIA.

January 9th, I visited the Fruitville school, Manheim Township, where a case of diphtheria developed, taken sick while at school. It was reported to the Health Officer that another from the school had complained of sore throat, there was suspicion among the patrons that it might have been diphtheria. From the informant I could receive there were no symptoms of diphtheria in the case in question, but in order to safeguard the school I directed it to be closed for disinfection. December 4th, I visited Chestnut Hill School in Upper Rapho Township on account of diphtheria existing, two deaths having recently taken place and not reported. Several sore throats had developed or were in the course of development while the chil-

dren were in school. I made cultures from several of the children's throats complained against in school, which proved positive for diphtheria. Quarantine regulations were strictly enforced on infected premises and the disease quickly subsided.

December 29th, the Health Officer handed me a copy of a death certificate issued by a doctor in Lititz Boro. of a death caused by pneumonia, contributory Pseudo-Membranous Laryngitis. There were several other children in the immediate vicinity, who sickened with sore throats, with one other death and only two reported as diphtheria. In company with the Health Officer I visited the infected district and from information received from the various residents, learned that the disease in question had been lurking in a quiet way for some time. The residents had just reason for alarm while there were four school rooms open in the district and school in session every day where the children intermingled without any restrictions in the infected premises. Another death following the one in question and attended by the same physician, where again the death certificate gave reason for doubt as to the cause of death; and the entire neighborhood which constitutes a congested district outlying Lititz Borough already in danger of an epidemic; the physician was prosecuted and convicted; the schools closed for disinfection; all infected premises promptly quarantined, after which the disease quickly subsided. During the year I inspected 3 dairy farms in Caernarvon Township, two in Leacock, one each in Paradise, Manor, Manheim and Rapho Townships, where I established different regulations in regard to the handling of milk products.

SCARLET FEVER.

May 24th, upon information that F. R. convalescent from scarlet fever sick at her home and a student of the Millersville S. N. S. returned to school after the expiration of 30 days from the onset of her illness and was not eligible to be received, I visited the school and finding her present, I directed that she be excluded until such time that her re-admission could be regularly ratified by the management. Though a few succeeding cases developed in the school, they were strictly confined to the school infirmary and the infected dormitory disinfected after which the disease abated.

Upon receipt of card reporting scarlet fever at a house in Salisbury Township I promptly visited the premises with a view of arranging for a safe plan for the disposal of their dairy products in which I succeeded. I learned from this family that the source of the infection was confined to a family by the name of R. S. from which the disease was communicated to the school. I promptly visited the family complained of, where I found six children in various stages of desquamation with a history of having had sore

throat and rash. I reported the same to the Health Officer who placarded the premises and placed them under modified quarantine and stopped the sale of milk. The disease soon subsided.

March 9th, I received a phone message from the Secretary of the Board of Health of Denver Boro telling me of a suspected case of scarlet fever in a family just outlying the borough limits, the family sending the daughter to the Borough High School. He had told me that there were then existing within the borough limits a number of cases suspected to be scarlet fever, while a few cases had been reported as such, asking me for a conference with the Board at my earliest convenience. I promptly visited the family close by the borough limits where I found a case of measles just developing, but the girl in question was in fair health having just recovered from illness which was accompanied with a rash. No diagnosis having been given, and there was no evidence of it having been scarlet fever, so I had reason to believe she had measles, the secondary case developing. I held a short session with the Denver School Board when I learned that scarlet fever was existing in the borough, schools in session and a number of premises not placarded. I suggested that they should have their physician visit the premises suspected and render them a diagnosis, enforce the quarantine upon these premises, exclude from school all coming from infected places and to have the school closed and disinfected after which the disease properly subsided. During the year I inspected eight dairy farms in Sudsbury Township for scarlet fever, two in Manheim, three in Rapho, four in E. Hempfield, two in Drumore, two in Manheim, two in Leacock and one each in E. Lampeter, Warwick, Eden, Mt. Joy, Fulton, Martic, Elizabeth, Colerain, two in Penn and two in Paradise Townships.

CHICKENPOX.

January 8th, the Health Officer informed me that an alleged eruptive disease existed in a number of families living in Oak Grove school district, E. Lampeter Township no report from a physician as to the nature of the disease in question. I visited three premises where I found the disease to be chickenpox. The places were placarded and school restrictions placed upon them. March 1st, received information through a school teacher in Manor Township that a number of families in her district were having sickness alleged to be chickenpox in some, and whooping cough in others. Fearing that an epidemic was imminent through the school by allowing lax conditions to exist, I made an investigation of the district and found 7 families with whooping cough and 4 families with chickenpox, all of whom I reported to the Health Officer, had the places placarded, and the usual restrictions placed against them. Also instructed the

teacher as to certain regulations that should be followed and thereby succeeded in having the diseases confined to a small radius. November 27th, I visited 4 premises in Little Britain Township, Taloria School district with a view of checking the diagnosis for chickenpox, the cards already signed by the householders, I confirmed the diagnosis in all the cases presented. Upon investigation I found the school infected by reason of a number of these cases having developed while at school. I issued an order to the Secretary of the School Board directing him to have the school closed for disinfection. The disease was confined to this district and did not extend far beyond at any time during the school year. Strict precautionary measures were carried out by teacher and directors.

December 8th, investigated a premises in Penn Township where it was alleged that chickenpox existed, the Health Officer being unable to get the cards signed. I examined five children in one family, and found three with the disease. I had the place placarded, and fixed the usual restrictions against their school attendance, which saved the school from becoming infected and any further outbreak of the disease.

Statistical Summary of Work Done During the Year.

Forms 37 received,	563		
Forms 34 received,	622		
Examined cases alleged to be		Dairies inspected for	
Variola,	1	Typhoid fever,	20
Diphtheria,	4	Diphtheria,	16
Scarlet fever,	19	Scarlet fever,	55
Varicella,	27		

Stock transferred from two premises.

Sale of milk stopped on 15 farms.

Ten schools closed. Reasons: Scarlet fever, diphtheria, chickenpox.

One Health Officer instructed.

LEBANON COUNTY.

Abstracts from Reports of Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

Dr. A. J. Reigel, C. M. I. The Medical Inspection work of Lebanon County for the year 1911 has been somewhat varied and extensive, having had epidemics of diphtheria in the townships of North and South Lebanon, Heidelberg and Union; of typhoid fever and varicella in the Township of Annville. All these epidemics except typhoid fever, originated in the public schools which were ordered to be thoroughly disinfected. During the epidemic of diphtheria in North and South Lebanon Townships, in the thickly settled parts where children were in close contact with one another, our modified form of quarantine did not suffice, as people were constantly

violating it by mingling with one another, until we had an outbreak of about thirty cases and the disease making its way into the city of Lebanon, where later on we had the worst epidemic of diphtheria we ever had. This condition kept on the increase both in the township and in the city until a watchman was put on the cases in the townships and absolute quarantine enforced in a few cases and the Board of Health in the City of Lebanon ordered all churches, Sunday schools, public schools and all other places of public amusement closed and thoroughly disinfected; ordered absolute quarantine of its cases and employed three extra Sanitary Officers to see that the proper quarantine regulations were carried out, after which the epidemics in the townships and city were soon abated and finally wiped out.

The epidemic of Diphtheria in Heidelberg Township originated in the public schools from children attending school coming from infected families who evidently had only mild cases without an attending physician, or a physician who erred in diagnosis.

It was through the kindness of Dr. F. D. Zimmerman of Schaefferstown that the outbreak of this epidemic came to my notice, to whom I am greatly indebted for the great interest and assistance he gave me in stamping out the disease in so short a time. The doctor attended most of the cases and always gave them proper instructions so as not to spread the infection in any way. One school in the township and all the schools in Schaefferstown were ordered closed and disinfected, as well as all the churches, Sunday Schools and places of public amusement. The ministers and general public took great interest and rendered valuable assistance in stamping out the disease.

The epidemic in Union County also began from contacts from infected families attending the public schools. Upon ascertaining the origin of the spread of the disease, through the kindness of one of the public school teachers of the same district, I ordered the school closed and thoroughly disinfected, after which the spread of the disease soon subsided.

Eighteen dairy inspections were made for diphtheria. In eleven cases the sale of dairy products was continued, while in seven cases the sale was stopped on account of certain circumstances of the families, who were not agreed to have any of their family leave the premises and attend to the milk product nor engage outside help, nor remove their stock to other premises.

TYPHOID FEVER.

The epidemic of Typhoid fever in the Township of Annville was referred to me by the Department for investigation. After visiting the premises of twelve patients for information as to the probable

cause for so many cases in a small town, I determined that the ice and water were the probable cause, samples of which were taken to the Health Officer and sent to the Laboratories for analysis.

Fifteen dairy inspections were made for typhoid fever. As it would mean quite a lot of detail to go into each one separately I will give only such information as will cover the cases in general. In all of these cases the sale of dairy products was continued except one, from which the stock was transferred to other premises. I found the water supply good in all cases except one, from which the Health Officer took samples and sent them to the Laboratories for analysis. In all cases the excreta were properly disinfected and buried more than one hundred feet from any water supply. The attendants of the milk products used proper disinfecting measures of themselves and in the care of milk products and milk utensils.

VARICELLA.

The epidemic of varicella in the Township of Annville began in the public schools from children attending school coming from infected families that had no attending physician. At the request of the Department I made an investigation and discovered that there were twenty-two cases in the town and most of them without an attending physician. I ordered the schools thoroughly disinfected and asked the co-operation of the teachers in sending information of any new cases to the Health Officer, I examined fifteen cases and sent the cards to the Health Officer, after which the premises were placarded. The Health Officer investigated the remaining seven cases, got the householder's card and placarded the premises, after which I checked up the diagnosis of the cases. After the expiration of twenty-one days from the date of onset, the premises were disinfected and the children re-admitted to school.

SCARLET FEVER.

Ten dairy inspections were made for scarlet fever and in eight cases the circumstances were such as to allow the sale of milk products, while in two cases the sale was stopped on account of the families not agreeing to comply with the regulations of the Department. Special care was ordered to be taken with the patients so that desquamation had entirely ceased before disinfection was done.

COMMENT.

In addition to the brief summaries given above, I wish to say that experience has taught me that the most good in the work can be accomplished through the educational plans. I made it a point to instruct my Health Officers properly so they understand their duties thoroughly; have them to be just and reasonable and gentle-

manly in all their dealings in the work coming under their jurisdiction; and use no harsh methods unless absolutely necessary.

Most of our physicians are reporting their communicable diseases promptly and are in full co-operation with the work, rendering valuable assistance in carrying out the regulations of the Department of Health.

Statistical Summary of Work Performed During the Year 1911.

Forms 37 received,	364		
Forms 36 received,	369		
Forms 34 received,	373		
Examined cases alleged to be		Dairy farms inspected for,	
Typhoid fever,	1	Typhoid fever,	15
Diphtheria,	4	Diphtheria,	18
Varicella,	22	Scarlet fever,	10
Measles,	15		

Stock transferred on one farm.

Sale of dairy products stopped on 9 farms.

Eleven schools ordered closed. Reason, diphtheria.

Two Health Officers instructed at office

Three schools examined for transmissible diseases.

LUZERNE COUNTY.

Abstracts from Reports of Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

TYPHOID FEVER.

Dr. Chas. H. Miner, C. M. I. January 9, I received complaint from Health Officer that a man in Wright Township had destroyed a typhoid fever placard. On investigation it was discovered to have been done through ignorance, and when placard was replaced no further trouble developed. January 23, received complaint from Fairview Township about nurse leaving premises of a typhoid fever patient before quarantine was lifted. Upon investigation the Health Officer found that the nurse had taken all necessary precautions to prevent the spread of the disease. July 14, received notice of two cases of typhoid in close proximity at Pringle Hill, Kingston Township. Authorized the Health Officer to make as careful an investigation as possible to find out if these patients had visited each other. He found that one of the men worked in the mines and drank the water there, but otherwise could find out nothing of import. The other patient had worked in Wilkes-Barre and drank water from pipes supplied by the Spring Brook Water Co. Both houses were placarded and the Department's ruling carefully followed out, so that no new cases developed in that neighborhood. September 12, had an interview with the Health Officer about a case of typhoid fever in Salem Township, where the patient had been removed to the hospital. Authorized him to

thoroughly fumigate the house, but not to placard. October 21, received report of a case of typhoid fever in Shavertown, Kingston Township, where there had been five cases in the same house. Specimens of water were secured for analysis from three wells in the neighborhood and also from the Huntsville dam. The examination of these specimens showed some contamination, but nothing very definite could be decided upon. One of these cases died and the other four recovered. The Health Officer gave good service in seeing that quarantine was strictly enforced.

DIPHTHERIA.

September 22, received complaint from the Health Officer in Hanover township that a case of diphtheria had developed in the school. I directed an investigation and instructed the School Board to close the school at once until it was thoroughly fumigated. Our request was immediately complied with and no other cases developed in the said school. December 26, was called to a home in Wilkes-Barre to diagnose a disputed case of diphtheria. Although the case had almost recovered and the diagnosis rather doubtful, through the Department's information I was able to settle the dispute very successfully.

SCARLET FEVER.

March 4, a case of scarlet fever was reported where the family was in destitute circumstances. After establishing the Department's regulations the Health Officer had an order of relief made out and the Poor Board furnished the necessary supplies. May 12, a physician of Freeland, Hazle township, called up about a midwife visiting a home where scarlet fever existed. Two other physicians and the Health Officer also interviewed me about this case. Wrote the Department the same day and the matter was settled at once.

CHICKENPOX.

January 7, following complaint that a number of cases of chickenpox existed in Lehman township, where no physician was in attendance, I deputized the resident physician to visit the families and confirm the diagnosis and see that the houses were placarded. February 12, had interview with the Health Officer about cases of chickenpox in Shickshinny, Salem township. Authorized the resident physician to visit the suspected cases and confirm the diagnosis; a large number of these cases being among the school children. The school at Shickshinny was closed and thoroughly fumigated and the outbreak of the disease checked after this procedure. December 21, three cases of chickenpox were reported in Salem township not attended by a physician. I deputized the resident physician to visit the cases and enforce the laws of the Department.

MUMPS.

January 28, the Health Officer reported quite a number of cases of mumps in Bear Creek township. After the deputy physician confirmed the diagnosis and the houses were placarded, the Hendler school was closed and fumigated. The spread of the disease was checked after this procedure. March 3, a physician interviewed a number of cases of mumps, which developed among the students of the Kingston Seminary, Kingston township. Gave him explicit instructions in the State law and the epidemic was soon checked.

DAIRY FARMS INSPECTED FOR TYPHOID FEVER.

May 16, the Health Officer of Jackson township reported a case of typhoid fever on a dairy farm. May 17, I made a personal investigation of the case with the Health Officer and found that the patient was a girl sixteen years of age. Although the case had been pronounced typhoid fever by a reliable physician there seemed to be some doubt as to the proper diagnosis. However, we acted as though the case was one of typhoid fever and took all the necessary precautions. It was not found available for the father to transfer his stock, so after taking a disinfectant bath and boiling water in all the milk cans and utensils, he removed to the barn and remained there until the patient had recovered and the house fumigated. October 5, the Health Officer reported a case of typhoid fever on a dairy farm. Patient was removed to the hospital and the Health Officer was instructed to see that water was boiled in all the milk cans and utensils and the house thoroughly fumigated.

BOROUGH EPIDEMICS.

February 24, had an interview with the Secretary of the Plymouth Board of Health in regard to a number of cases of typhoid fever in the borough. I gave him complete instructions as to the Department's rules in such a situation and offered him my assistance if required. The Board of Health was able to control the epidemic and no new cases developed.

April 5, had an interview with the Health Officer of the Larksville Borough Board of Health about a case of typhoid fever. Gave him explicit instructions and the local Board of Health carried out the Department's law and no further case developed.

September 22, received a telephone message from the Health Officer of Luzerne Borough that several cases of typhoid fever had broken out there. I immediately went to Luzerne and made a personal investigation and found that there had probably been fifteen or twenty cases of typhoid fever there during the summer, but only eight of these cases had been reported. A large number of the cases had used water from two wells in the neighborhood, and the child of one

of the owners of the well had had a fever six weeks previous. Reported conditions to the Department the same day, and also wrote the Chief of the Laboratories to send us two water containers to secure specimens from these wells for analysis.

September 30, had an interview with Health Officer Templeton, special field agent for the State Department, who had been sent on to investigate conditions in Luzerne Borough. After a very rigid investigation, we could not arrive at any definite conclusion as to the source of the epidemic. October 28, received a communication that a new case of typhoid fever had developed in Luzerne borough. I went there at once with the Borough Health Officer and made a careful inspection to find out the source of the infection. The following day I attended a meeting of the Borough Board of Health in regard to the control of the epidemic. It was explained to them that personal contact, in spite of all precautions, seemed to have been the cause of the epidemic, as the people lived in close proximity, and absolute quarantine was almost impossible. The schools were ordered closed at once; strict quarantine enforced with the result that the last case was reported October 29.

STATISTICAL SUMMARY.

Forms 37 received	437	Schools ordered closed and fumigated on account of:	
Forms 43 to 49 received	445	Typhoid fever,	1
		Diphtheria	1
		Mumps	1
		Chicken pox,	1

Two dairy farms investigated for typhoid fever; two boroughs investigated on account of epidemics.

LYCOMING COUNTY.

Abstracts from Reports of Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

Dr. C. W. Youngman, C. M. I., in accordance with yours of May 1st, 1912, I herewith submit report of work done in Lycoming County during the year 1911.

By request of the School Directors I visited, January 27th, Newman School, Wolf township, to inspect children with some reported contagious disease. Found one boy in school with marked case of Impetigo Contagiosa; ordered his dismissal. Visited a house where the same disease was reported, found two or three cases there among the children; directed family what to do to cure it. No doctor had these cases. It spread no more.

On report of Dr. S., I visited a family in Lycoming township, February 21, and found four cases of suspected acute poliomyelitis, these all occurring in one family with no other known cases ever having occurred in the vicinity reported was interesting from a professional standpoint.

One little girl had acute nephritis with the leg paralysis and one arm affected. Two other children had slight paralysis of legs but had about recovered. The mother aged about 30 years was almost helpless from partial paralysis of legs and had acute cerebral symptoms accompanying. They all had about same history of slight chills and malaise two or three days preceding loss of power in limbs. They also had temperature varying from normal to 103 degrees in severest cases. The sanitary condition of the house was poor. It was an old house with most filthy surroundings, good water but poor drainage. On March 1st, the Department, believing the outbreak was sufficiently important, sent Dr. Hunt, Associate Medical Inspector to visit them. He believed it to be acute polio and I believe so reported. No other cases have occurred. Disinfection and quarantine were thorough. All the cases recovered perfectly.

TYPHOID FEVER.

Health Officer reported a small outbreak of typhoid fever in two houses in Porter township, or outskirts of Jersey Shore. The general sanitary conditions about these premises were fair but the privies were open, nearly full, and accessible to flies. Jersey Shore water was used and it was good. Three cases had occurred in two houses; the last being a young man who worked on N. Y. C. R. R., and had his dinner packed by a woman in West Va., who had had typhoid fever a few months before. As these were new cases in this locality and she had prepared food for the other cases we suspected her as a "carrier." The urine and feces were examined twice by the State Officials, but with negative results. After disinfection of privies and premises no other cases occurred.

August 22nd, by request of the Chief Engineer in company with the Health Officer I visited and inspected McMurrins Run in Lime Stone township, which supplies water to several farms below. About two miles from the intake an old lumber camp had existed with stables and manure pile on the bank of the stream. This had been draining in, polluting the water. Notice had been served on the owners, but they were slow to abate it. On this day, however, we found the largest part of the manure had been removed. It had been carelessly done, but the great danger was removed.

October 11, the Department ordered me to investigate an outbreak of typhoid fever in the borough of Montgomery. Found that in and about this village typhoid fever had been occurring with more or less severity for many years. The village has water works drawing sup-

plies from a small stream more or less polluted with farm drainage and also from deep driven wells. Inofficial reports showed the stream water contaminated, but the driven wells good. About twenty cases of typhoid fever had existed from June to August but only a few of them used the village water and possibly all used water from house wells which was believed to be good. These house wells were usually situated where they would receive underground drainage from cess-pools, privies, hog-pens, etc., which were conspicuous everywhere. In the section along the creek running through the place were privies and hog pens without any pretense of being walled up so that contents of privies were exposed on all sides and countless flies could be driven from the piles of fecal matter. Houses were within two feet of these and if flies carry infection there was every chance to do it. This was reported to the Department which instructed the local Board of Health what to do, but little was accomplished until a very prominent person took the fever and died with it. Then the community was aroused. The Department on October 5, instructed me to visit the local Board of Health and get them to work. The Board of Health was hard to organize as everybody on it had been so abused that no one wanted to serve, particularly was it hard to get a doctor on it as the law required. This outbreak ceased but was due to wide prevalent neglect of the privies, hog pens and wells in the village.

A case of typhoid fever occurred in a dairy farm in Muncy township, October 26th. It was in a tenant house near the cow stable. The water was from a well on premises and seemed to be good. A poorly drained bottom of an old canal was close by, also a poorly protected privy. Ordered these remedied but believed it to be a sporadic case. No others occurred.

October 27th, the Chief Medical Inspector requested me to investigate an outbreak of scabies in Jersey Mills in McHenry township on complaint of patrons. Found many cases at school and at homes. No doctor had seen them so directed them how to cure it. Outbreak ceased.

December 5th, Chief Medical Inspector requested me to investigate an outbreak of diphtheria in Hughesville borough. Found some violation of quarantine but the local Board of Health had the epidemic under control. It had started from neglected cases and spread before authorities were aware of it.

December 7th, on request of the Chief Medical Inspector I visited the Cogan House school in Cogan House township, to inspect it for alleged scabies among the pupils. Found several cases and dismissed them with directions how to cure. No doctor had seen them.

Statistical Summary of Work Done During the Year.

Forms 34 received	229	One dairy examined for typhoid fever
Forms 36 received	183	
Forms 37 received	189	

McKEAN COUNTY.

Abstracts from Reports of Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

Dr. W. C. Hogan, C. M. I. February 2, together with the Health Officer Dr. E. M. McL., deputized physician, inspected five children in one family, and eight children in another family by same name; also one other young man thought to have scarlet fever, but proved to be rheumatic fever. The two families first mentioned were infected more or less with a mild form of scarlet fever, and their premises were quarantined.

In compliance with your instructions I visited Smethport October 20, and found ten cases of scarlet fever, which I cannot trace. The people think it was brought there during the county fair. I am inclined to think it came from some other source. These cases are all under moderate quarantine, and in some of the homes it is not possible to isolate the patients properly, and there is considerable grumbling among neighbors as to the wage earners coming and going. I would suggest that absolute quarantine be used in all these cases, and guards be placed to prevent anyone from coming or going. The schools are closed, and although the disease has been running a week, no new cases are developing.

I also found one case of diphtheria in Smethport, and conditions very sanitary surrounding the premises.

Through advice from the Department I investigated a case of typhoid fever in Smethport, a man who had been working at Austin for the Department. After a careful examination by Dr. C., the diagnosis was muscular soreness and bronchitis, due to exposure.

STATISTICAL SUMMARY.

Forms 34 received	213	9 cases of alleged scarlet fever examined
Forms 36 received	131	
Forms 37 received	169	

MERCER COUNTY.

Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

MEASLES.

Dr. P. P. Fisher, C. M. I. January 1, 1911, received a letter from the Health Officer of Perry township that measles were in one of the rooms of a school at Hadley, Perry township. On inspection found there were three cases taken sick while at school. Ordered school closed and the school house disinfected.

February 22, received (form 34) signed by H. C. of Salem township, reported measles in his family. Made an inspection and verified the householder's diagnosis.

March 15, received (form 34) reporting measles on the premises in Sandy Lake township. I made an inspection and verified the householder's diagnosis. Also verified the diagnosis in a case of measles in Mill Creek township, and another in Salem township.

March 24, received (form 34) reporting measles in three families of Mill Creek and Sandy Lake townships, I made an inspection and verified the diagnosis of the householders. April 1, inspected and verified the diagnosis of measles in two families. April 2, received (form 34) reporting measles and mumps in families of four homes in Sandy Lake and Mill Creek townships. Made an inspection and verified the diagnosis of the householders. Received reports of measles in three more families in Salem township, where I inspected and verified the families diagnosis.

In all of the above cases quarantine was enforced from the time of inspection, and at the expiration of the quarantine period the houses were properly disinfected.

DIPHTHERIA.

On receipt of a report that diphtheria was on the premises of J. S. in Cool Spring township, I made an inspection and ordered the school closed and disinfected, the patient having taken sick while in school.

Health Officer of Fairview township phoned me that there were several cases of diphtheria in White school. I made an inspection and found several families had been having sore throat, but did not call a doctor. There were two or three families that called a doctor and he diagnosed their cases diphtheria. I ordered the school closed for two weeks and the school house disinfected. There were no more cases after that.

October 10, received word of diphtheria on the premises of A. C. Worth township, stating that butter was being sold from a house where there was diphtheria. Butter was made in the room adjoining the room of the patient, the door between the rooms being open. There was about ten pounds of butter made and ready for the huckster. They were looking for him at any time. I explained the danger of selling butter from a house where there was diphtheria. They seemed perfectly willing to abide by the law. Antitoxin had been used on the patient and immunizing doses for the rest of the family.

November 2, received phone message from the Health Officer of Hickory township, that some of the pupils of No. 5 school were ill with diphtheria while at school. I made an inspection and ordered the school closed and disinfected. The Health Officer had received

(form 34) from attending physician and had placarded the house. December 20, made another inspection in same township, and found there had been a family attending school with sore throat. They had called a doctor, but he had not pronounced it diphtheria. I learned later that he had used antitoxin. A child who had been sitting with one of these pupils was taken with diphtheria and died. I think the first doctor was responsible for this death. Parents did not think it was diphtheria and did not call a doctor until the child was nearly moribund. I ordered the school closed and disinfected, the directors complied with my orders.

April 15, received a letter from the Department stating that an immigrant from a cholera infected ship had gone to the coal mines at New London, Mercer county. I made an inspection and instructed the mine owners, and the doctor of the mines, to watch for the immigrant and should he come there to watch closely for any bowel trouble that might develop within ten days or two weeks.

July 19, upon advice from the Health Officer in Cool Spring township, stating that there had been two cases of typhoid fever in the J. W. family, and stating in his letter that the doctor in attendance thought the fever was contracted by drinking water from the well, I made an inspection of the well, secured sample of water and ordered the well closed. The sample of water turned out to be negative.

September 12, I received a letter from the Department stating they were getting no reports of any diseases from Wolf Creek, Liberty, nor Pine townships, and asked me to make an investigation. I called on all the doctors in Grove City and found they had not been reporting the diseases to the Health Officer. They each promised to report all cases in the future.

November 11, received a letter from the Department asking me to secure a specimen of blood from a child in Sugar Grove township, that was suffering from poliomyelitis, which I did, and forwarded the same to the Department.

TYPHOID FEVER.

October 20, I received letter from the Health Officer of Sugar Grove township, stating that there were three cases of typhoid fever in two families. He reported one death. They used water from the same well. I made an inspection and ordered the well closed. Secured a sample of water and sent same to the Department. It was found to be negative. Upon investigation I found one of the patients had been working away from home and come home sick. The other two had been in various places for the past few months.

The work in Mercer County has been very satisfactory during the year. Health Officers got along very nicely, without any trouble to speak of. I wish to thank the doctors for their co-operation in the

work. The people are taking very much more kindly to the work of the Department as they become better acquainted with it. They are all anxious for disinfection after contagious diseases. They do not object to placarding and I only hear words of praise for the Department. I think the people are fully appreciating the great work that is being done by the Department.

Statistical Summary of Work Done During the Year 1911.

Form 37 received	206		
Forms 43 to 49 received	238		
Cases examined alleged to be		Dairies inspected for	
Scarlet fever	4	Typhoid fever	2
Diphtheria	18	Diphtheria	2
Measles	21		
Chickenpox	4		

Sale of milk and butter stopped from 3 premises.

Five schools ordered closed by reason of diphtheria.

Six Health Officers instructed at office. Four elsewhere.

Two wells closed by reason of typhoid fever.

MIFFLIN COUNTY.

Abstracts from Reports of Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

Dr. C. H. Brisbin, C. M. I. The year 1911 was a very quiet year so far as communicable diseases were concerned, in this county. There were 53 cases of chickenpox, 18 cases of typhoid fever, 14 cases of diphtheria, mumps 10, scarlet fever 9 and measles 6.

February 9, I received a phone message from the Health Officer of Wayne township of several cases of mumps and chickenpox, in his district without medical attendance. I visited families and found three cases of chickenpox and one of mumps quarantined.

July 24, inspected a home in Menno township, for typhoid fever. The disease was contracted in another county. Arranged to have milking done by a neighbor. September 30, inspected a home in the same township for diphtheria where milk was sold. I transferred eight cows to farm of a son.

October 18, inspected a home in Granville township, for chickenpox. No doctor in attendance. October 21st, upon receipt of a card signed by the father, I confirmed the diagnosis of measles in a case in Union township and placarded.

December 2, discontinued sale of milk at a farm in McVeytown where diphtheria existed, which I afterward had to follow up, as there was no local Board of Health in the town.

Statistical Summary of Work Done During the Year.

Forms 34 received,	143		
Forms 36 received,	109		
Forms 37 received,	113		
Cases examined alleged to be		Dairies inspected for	
Typhoid fever,	2	Typhoid fever,	1
Diphtheria,	1	Diphtheria,	2
Varicella,	45	Scarlet fever,	1
Measles,	4		

Sale of milk stopped at two premises.

MONTGOMERY COUNTY.

Abstracts from Reports of Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

Dr. H. H. Whitcomb, C. M. I. Being informed that scarlet fever existed in the townships of Horsham and Montgomery, the same not having been reported by the Health Officers, I went there December 2nd, to investigate. I found eight cases of scarlet fever at that time, these had been placarded by the Health Officer, but notice had not been returned to the Department. I found that a number of other cases had previously existed in the townships. The Health Officer had placarded them, but had made no return.

I saw 38 cases of measles, 12 cases of whooping cough incidentally, when looking for measles; 10 cases of chickenpox, where no doctor had been employed; and confirmed the diagnosis of scarlet fever in three cases where the physician was in doubt; a case of infantile paralysis having been reported, and the physician being in doubt, I saw the same, but could not confirm the diagnosis. Time has proved I was correct, as the child has made a very quick recovery.

Attended to the proper disposal of milk in five dairies where typhoid fever was reported, two dairies where scarlet fever existed, and one where diphtheria existed.

I instructed nineteen Health Officers; two new Health Officers having been appointed in my district. Saw a great number of other persons who consulted me concerning matters pertaining to my office.

I closed six schools on account of contagious disease; instructed one school board where the school had been closed for the year, that the same could not be reopened in the fall until it had been thoroughly cleaned, paper removed from wall, and fumigated, and directed the Health Officer to see that these instructions were properly carried out; he reported these things as having been properly attended to.

The Health Officers have reported to me 737 cases of contagious or reportable diseases, though I am sure in some districts the number reported is but a fraction of the number that occurred. We are gradually correcting this and the new officers are more observant of the rules. Measles, whooping cough, and scarlet fever have been most prevalent during the year. Diphtheria to a less extent than usual. Some cases of pneumonia have been reported not because there have been fewer cases than usual, but because they have not been reported. Physicians do not seem to understand as yet, that pneumonia and phthisis are reportable diseases.

In conclusion, I believe the reporting of disease is being better and more promptly done each year. Physicians are now reporting their cases of scarlet fever, diphtheria and typhoid fever promptly, and few, if any, are now neglected. But there seems to be a disposition to ignore measles and whooping cough. The people themselves will not employ a physician in these cases, so they may avoid quarantine. Knowing this, some physicians take the risk of ignoring notice so as not to be injured in their practice. Of course, I do not know this absolutely, but believe it to be so from my observation. I have often been told "that we didn't send for a doctor, because he would put up a card, and we did not send for you, because we knew you would report us."

I think boroughs should be required to conform to the regulations of the State Department as to placarding and fumigating, and removal of quarantine; these variations in practice cause much discussion and hard feelings towards our officers.

Statistical Summary of Work Done During the Year.

Forms 34 received,	622		
Forms 36 received,	544		
Forms 37 received,	440		
Cases examined alleged to be		Dairy farms inspected for	
Typhoid fever,	2	Typhoid fever,	3
Diphtheria,	1	Diphtheria,	3
Scarlet fever,	13	Scarlet fever,	2
Varicella,	9		
Measles,	19		

Stock transferred from 4 premises.

Sale of milk stopped on 3 dairy farms.

MONTOUR COUNTY.

Abstracts from Reports of Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

SMALLPOX.

Dr. Geo. A. Stock, C. M. I. During the early months of the year we had a slight smallpox scare, which was abated after close and careful watching. The first case originated in a Lumber Camp, the

next two in a private family, and then two others developed in separate families, where there were about eighty contacts. We followed up all contacts and had them vaccinated, one, however, refused vaccination, and he was placed under absolute quarantine.

TYPHOID FEVER.

Quite an outbreak of typhoid fever we had to combat in the spring of the year, which was traced to one person, and indirectly the outcome of polluted water. The result was five deaths out of thirty-four cases. A general clean-up and improvement in the water supply was necessitated, in which the Board of Health heartily co-operated.

October 7th, investigated an outbreak of scarlet fever in Mahoning Township, four in one family suffering with the disease and members of the family attending school after the rash appeared. There was some strenuous language used between parent and physician in one case, which was the result of a difference in their ideas as to the length of quarantine.

June 22nd, investigated a case of measles and three cases of chickenpox at a home in Limestone Township, no physician in attendance.

December 12, inspected a dairy farm in Mahoning Township for diphtheria, and changed the arrangements of handling the milk.

Statistical Summary of Work Done During the Year.

Forms 34 received,	53		
Forms 36 received,	29		
Forms 37 received,	27		
Cases examined alleged to be		Dairy farms inspected for	
Variola,	8	Diphtheria,	1
Scarlet fever,	8		
Varicella,	2		
Measles,	1		

MONROE COUNTY.

Abstracts from Reports of Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

Dr. Walter L. Angle, C. M. I. March 21st, I received information that chickenpox was prevalent in Sciota in Smithton Township, and not under quarantine. March 22nd, I visited the suspected cases and found four cases in three families.

August 1st, I received a telephone message from Dr. L. B. S., Bushkill, Pike County, that he wanted diagnosis of a case of diphtheria confirmed, which was done. Case L. S. on the premises of C. E. V., Echo Lake, Middle Smithfield Township. The case not being properly isolated in a Boarding House with sixty guests I had patient removed to a tent about 300 yards from house. Room occupied being thoroughly disinfected at once. On Monday, August 7th, I was informed by Dr. L. B. S. that the case had eloped by wagon to East Stroudsburg, then to Brooklyn via D., L. & W. R. R. I notified the

Railroad Company, also the Health Department of the City of New York. Case found and report from New York Health Department received.

August 20th, Dr. L. B. S. called me by telephone asking me to confirm the diagnosis of diphtheria on the premises of D. T., Middle Smithfield Township, case in Boarding House 100 guests. I had the case well isolated, and rigid quarantine enforced. Detailed report to Department August 21st. September 13th, Dr. B. F. Royer, of Harrisburg, called me by phone requesting me to make investigation of two cases of diphtheria at Buckhill Falls, Barrett Township. Upon arrival at the settlement I found that the parents of the child who had been in quarantine had left for their home at Lansdowne by automobile. I notified Dr. Royer at once. The other case being properly quarantined. Interviewed parents of child suffering from diphtheria and they promised to observe quarantine, which they did.

December 11th, Dr. L. B. S. called me by telephone to confirm the diagnosis of diphtheria on the premises of J. P. D., Lehman Township, Pike County, diagnosis confirmed. Case, a student at East Stroudsburg Normal School, where diphtheria existed at the time. As Dr. W. B. K., C. M. I., of Pike County was 23 miles from the case, and Dr. C. B. S. wanted confirmation on the same day due to demands of parents, I made the inspection and notified Dr. K. of my action.

December 11th, the local Board of Health of East Stroudsburg asked me to assist them in taking action in cases of diphtheria existing at the East Stroudsburg Normal School. Not being properly organized and being without a physician the local Board of Health wanted the State Department of Health to take charge of the situation. I notified the Department of conditions present at the time. Dr. C. J. H., of Harrisburg, visited the East Stroudsburg Normal School on December 14, which had been placed under quarantine. The cases in the town and at the school numbered ten. The school was ordered disinfected as well as the public school.

Statistical Summary of Work Done During the Year.

Forms 34 received,	39	Five cases were examined alleged to be diphtheria.
Forms 36 received,	36	
Forms 37 received,	30	

NORTHAMPTON COUNTY.

Abstracts from Reports of Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

Dr. Edgar M. Green, C. M. I. During the year, Northampton County was peculiarly free from epidemic and contagious diseases. But one inspection was made during the entire year. On September

23rd, Dr. Z. visited Butztown and inspected a creamery on account of a case of typhoid fever. Butter and ice cream were manufactured at this creamery and the entire output was delivered in the Borough of Bethlehem. The son who had been delivering goods in different parts of Bethlehem, frequently drank water during the day while delivering goods. He no doubt received the infection in this way. The creamery is located 150 yards from his residence and received the water supply from a well. The cesspool is some distance from the house and situated so there could be no drainage from it to the cistern. Instructions were given that they should have nothing to do with the manufacture of any of the creamery products so long as there was sickness in the family. He was allowed however, to drive his team to and from the creamery, provided he stayed out of the sick room and had nothing to do with the care of the patient.

No other cases of typhoid fever developed and no epidemic occurred.

Statistical Summary of Work Done During the Year.

Forms 34 received,	398	Two dairy farms inspected for typhoid fever.
Forms 36 received,	311	
Forms 37 received,	279	

NORTHUMBERLAND COUNTY.

Abstracts from Reports of Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

CHICKENPOX.

Dr. R. H. Simmons, C. M. I. January 11th, through advice from the Health Officer I went to Weigh Scales and diagnosed four cases of chickenpox, also ordered the school closed.

MUMPS.

April 19th, inspected eight cases of mumps in Rapho Township, and found they all had been attending school. I ordered the school closed until disinfected.

May 3d, through a report of the Health Officers of Elysburg I investigated two cases of measles in Shamokin Township without a physician in attendance.

SCARLET FEVER.

April 11th, having received a card from the Health Officer reporting a case of scarlet fever at the Orphanage, I drove there and found that the case was completely isolated in a small building away from the other buildings, and every precaution being taken. May 31st,

the Health Officer reported another case of scarlet fever where butter was being sold, and I found it necessary to change the arrangements of handling the milk products.

TYPHOID FEVER.

August 11th, through a telephone message from the Health Officer that a dairyman had a daughter ill with typhoid fever in Shamokin Township, I went there and was obliged to change the arrangement of handling the milk. October 20th, inspected another case of typhoid fever in Lewis Township, where I found it necessary to transfer the stock to the farm of the owner's son in order to continue the sale of milk.

DIPHTHERIA.

November 8th, I went to Fisher's Ferry School and ordered the school closed on account of three cases of diphtheria, until the premises were thoroughly fumigated.

PIKE COUNTY.

Abstracts from Reports of Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

Dr. Wm. B. Kenworthy, C. M. I. There is nothing special to report from this county, for the year, except one case of typhoid fever, that was brought here from Staten Island. In addition, there were but eight cases of scarlet fever, two of diphtheria and three of chicken-pox during the year.

Statistical Summary of Work Done During the Year.

Cards 34 received,	16	Cards 37 received,	13
Cards 36 received	10		

PERRY COUNTY.

Abstracts from Reports of Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

MUMPS.

Dr. A. R. Johnston, C. M. I. March 19th, I received a letter from the Health Officer stating that in his opinion there was a case of mumps in a family that would neither affirm nor deny its existence, but refused to sign the card. I visited the place and found the daughter, aged 16, had the mumps and no physician in attendance. I also found another case in a neighbor close by. Both were quarantined and reported. April 11th, the Health Officer informed me of

another case of mumps which I visited and found good reason to believe that several other children in the household had previously had the disease and no physician had been called. The case was reported and family quarantined.

CHICKENPOX.

November 25th, I received telephone message from the Health Officer that there were cases of chickenpox in five families, all patrons of the Milltown School in Spring Township. I visited the community and found chickenpox in each of the households designated above. They were reported and placed under quarantine. No physician had been in attendance.

MEASLES.

April 25th, upon instruction received from the Department I visited two households in Sullivan Township, Juniata County. It had been alleged that they were harboring scarletina but upon investigation it was found to be measles. No physician had been employed in either family. The cases were reported to the proper Health Officer.

DIPHTHERIA.

July 8, having received notice of a case of diphtheria in a family, I made an inspection. We arranged that a family living nearby would take care of the dairy business and keep out of the infected house until after the quarantine was lifted.

TYPHOID FEVER.

Having received a report of a case of typhoid fever in a family where cream is sold to the Elgin Creamery I made an investigation April 13th. I found the man to be very reasonable, and together we went over the instructions of the Department as set forth in the Manual. His son, who has not been in the sick room will board and lodge at a neighboring house and will attend to the work of the Creamery. As instructed by the Department in a letter bearing date of July 5th, I made an inspection of two adjoining houses in which five cases of typhoid had recently developed for the purpose of discovering the cause. The entire premises, and especially the well and privies were in an insanitary condition, as set forth in a report to the Department dated July 10th, 1911.

Having received notice of the existence of a case of typhoid fever in a family in District 677, I made an investigation September 2. The father and son agreed to take an antiseptic bath, board and lodge at a neighbor's and attend to the dairy business without the assistance of any of the other members of the family.

TUBERCULOSIS.

Acting upon instructions from the Department, I inspected September 16th, a premises for the purpose of ascertaining conditions on a farm, where the wife was handling the milk and suffering from tuberculosis. Finding condition as stated above, and also that the dairying utensils were in bad condition I ordered the suspension of the dairying business as reported in detail to the Department at the time.

Statistical Summary of Work Done During the Year.

Forms 34 received,	122	
Forms 36 received,	99	
Forms 37 received,	89	
Cases examined alleged to be		Dairies inspected for
Scarlet fever,	4	Typhoid fever, 2
Varicella,	5	
Measles,	1	

POTTER COUNTY.

Abstracts from Reports of Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

Dr. E. H. Ashcraft, C. M. I. According to a report and general rumor, I deemed it advisable to make a trip to investigate supposed cases of scarlet fever at Roulette. It seems the people were trying to smuggle the trouble, on account of the quarantine regulations, and the newspapers were helping them along and inciting the community to disregard quarantine, which, of course, belittled the opinion of the Board of Health. The trouble, however, proved to be less serious than it was made out to be, and after compelling several families to observe the regulations, the law was kept and the trouble abated.

The same trouble occurred with several cases of measles, where one man used very strenuous language, because we compelled him to be quarantined. I went there with the Health Officer, and after being admitted to the home very reluctantly, I diagnosed measles and found quite a number of families having the disease, with no physician in attendance.

Statistical Summary of Work Done During the Year.

Forms 34 received,	203	Cases examined alleged to be	
Forms 36 received,	200	Scarlet fever,	3
Forms 37 received,	154	Measles,	1

SCHUYLKILL COUNTY.

Abstracts From Reports of Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

DIPHTHERIA.

Dr. L. T. Kennedy, C. M. I. October 3d, Mr. H., undertaker, and Health Officer of Minersville called me by phone, relative to death on the premises of J. F., Branch Township, reported as spasmodic croup, asking for instructions as to handling same. Went to Minersville, saw the attending physician and obtained history of the case. There was a reasonable doubt in the physician's mind as to whether the disease was not diphtheria, and finally he reported the death from this disease, and the house was placarded at once and disinfected, and placard removed ten days later.

December 10th, had a phone message from the Health Officer of West Mahanoy Township, that quarantine regulations were not being obeyed on premises of Mrs. C. W. where diphtheria existed. Made an investigation same date, finding four adults and two children in household. The only infraction I could discover was the act of taking patient on front porch, which was about on a level with the dirt sidewalk where there was danger of patient mingling with the other children, who were playing around this house. After some difficulty, owing to the householder's belligerent attitude I explained the danger she was subjecting the other children to, and instructed her to keep the child in the rear of the premises. A guard was on duty watching other premises in the same place and I instructed him to add this charge to his patrol for several days, and report at once any further violations. This precaution seemed advisable, owing to the proximity of the borough of S. and the complaints from that source relative to supposed breaking of quarantine in the township. Had no further trouble here.

SCARLET FEVER.

March 8th, received letter from the Department enclosing complaint from Union Township relative to quarantine violations in cases of scarlet fever in Ringtown, with instructions to make an investigation.

I went there March 12th visited the school teacher's home where the disease was supposed to exist. Found parents absent, and three children at home, and from the eldest learned that a doctor had been called in the beginning of February and said they had La Grippe. From another source I found that one of the daughters had had an eruption some time previous, but upon referring to the school roll, found that H. was out of school one week, but denied

that she had an eruption, stating it was La Grippe. Was unable to find the other members of the family. I saw the doctor who confirmed the statement about La Grippe, but did not recall examining any children for scarlet fever, although not positive that he did not do so. However, as I was unable to locate H. L., the daughter suspected of having had the disease, and 40 days had elapsed since she was kept from school, I proceeded with the other suspects. Examined three of these cases but found no desquamations, also four school children, all attending Miller's School, Union Township. After leaving this premises, I went to another place where there were three school children. Examined J., aged 7, and P., aged 9, finding both afflicted with the disease, and that both had attended school while so afflicted, and the parents thought they contracted the disease at school. Then visited the B. T. premises, examining one scarlet fever suspect diagnosing it scabies, from the history obtained, but inasmuch as it began before Christmas, she had entirely recovered.

Complainant informed me that one of the above householders had advised him to tear down his placard and I went at once to see this party. He denied making such statement, and I explained to him the consequence of an act of this kind. As a result of the entire investigation, believe there was considerable animosity among several families, which was the cause of the conflicting reports and statements, although, as above noted, there was some foundation for them. I issued cards for the two cases found and ordered the Miller School closed and thoroughly disinfected, on account of the attendance of the two cases, which was done and the school fumigated.

I had supposed after the above inspection, that the parents of the children found afflicted with scarlet fever, would call in a physician to treat them so as to avert serious consequences from the disease, but on May 1st, 1911, noticing that the premises were still under quarantine, inquired, and learned that this had not been done. May 4th, deputized Dr. J. R. to examine patients and found both entirely recovered, which he reported to the Health Officer. Premises at once disinfected and quarantine removed. No further trouble from this vicinity. During January had considerable correspondence with Health Officer relative to scarlet fever in W. Mahanoy Township, and received a letter from Department with copy of anonymous letter relative to same, with instructions to investigate, but Dr. C. J. H., of Department, was sent in this district before I was able to go, consequently I did not take up the matter.

July 20th, Health Officer of W. Mahanoy Township called to see me relative to numerous cases of scarlet fever in Shenandoah and West Mahanoy Township, and I at once called the Department by phone and received instructions to make a thorough investigation.

with a view of ascertaining whether quarantine regulations were or were not, being obeyed. Went there on July 21, 1911, meeting our Health Officer at Shenandoah, who accompanied me on my investigation. Found the three reported cases in the Township living close together, but found no evidences of quarantine violations. The householders, however, did not understand English, and consequently any disobedience might be charged to ignorance, rather than any desire to break the law. It seems that the Health Officials of Shenandoah had claimed that the cases in the Borough of Shenandoah (an epidemic having broken out there) were caused originally by the lax quarantine in the township, so I secured a guard, I had him come to my office and instructed him thoroughly in his duties. After arranging for the guard, I called on the Secretary of Shenandoah Board of Health and obtained information as to the cases in that part of the borough adjoining the township, finding that six of the eight cases in the Fifth Ward developed before the first case in the township, and that the two latter cases in the borough were in families where the disease had already existed, which definitely established the fact that the outbreak in the township did not cause the one in the borough, in fact, it would appear to have been the other way. There were 18 cases in the borough at the time of my inspection, and they had two day guards for the entire town. On my way through the borough I noticed children from afflicted households, were gathered around the hydrants outside, (one hydrant for two houses, in places) with other children, but found no signs of such mingling in the township. As an additional illustration of lax methods in the borough, would cite the following: I stopped at one premises in the borough and examined the patient, as I had been informed that the premises were to be disinfected the following day, the 30-day period having elapsed. I found patient scaling on the feet, and instructed the Health Officials that they must have certificate from a physician stating that desquamation had ceased, before disinfecting.

On the whole, the investigation showed conclusively that the real trouble was in the borough and not in the township, but kept the guard on duty to avoid further complaint from the borough Health Officials.

August 17th, received a letter from the Department enclosing correspondence with the Health Officer and Secretary of Board of Health of Port Carbon, relative to unreported cases of scarlet fever in East Norweigen Township, just outside of the Borough of Port Carbon, with instructions to make investigation and report. Owing to the absence of the C. M. I. on vacation, it was arranged with Dr. O. J. C. to do his work, but his father died the day before, and he was unable to go. Inasmuch as arrangements had been made with

Health Officer and complainant to meet on the 20th inst., and the disease occurred early in July and there would be a diagnosis to make, my stenographer made this inspection in company with the Health Officer and complainant. The latter had been placarding some houses in the borough, and had been notified that a family a short distance away, in the township, had been afflicted, but were never quarantined, which caused his report to the Department. Neither householder nor his wife, on the suspected premises were home, but learned from a neighbor that the entire family had been sick about two months previous to our visit, and that Dr. J. C. C. had been in attendance also that there had been a death in the family. The Health Officer volunteered to return later in the day to see householders and have statement signed relative to attendance of physician, which he did and the statement in question was forwarded to the Department. August 21st, inquiry at the local registrar's office for this township, revealed death certificate of J. Z., son of F. Z., from diphtheria, and that Dr. J. J. C. had been in attendance and reported the death, but had never reported same to any Health Officials or our Health Officer. Certificate signed by householder and copy of death certificate, proving that the doctor had failed to report the case in the township, although the health officials of the borough informed us that he had reported cases in the borough.

October 21st, received card reporting scarlet fever on premises of W. E. M., Porter Township, stating that householder was a liquor dealer. By telephone I arranged that the householder should take disinfecting bath, have clothing disinfected and live in another part of the house entirely separate from the rooms occupied by patient and nurse, and to come in contact with no one from the other rooms. On October 25th, met Mr. W. E. M. in Pottsville, who informed me that the above instructions had been carried out. However, to be on the side of safety, I went there and made an investigation, finding the most excellent precautions being observed in every way, and that the instructions given in the scarlet fever circular were being carried out in the sick room. Allowed the sale of liquor to be continued under the existing conditions, after explaining the Department's regulations and the reason therefor.

November 1st, received instructions from Department to investigate dispute between Health Officer and physician relative to reporting cases in Butler Township. Visited both parties, as well as the diagnosis where the disease occurred, finding that the doctor had been somewhat late in reporting, and that the Health Officer had been slightly hasty and profane when speaking about it to the doctor, who replied in a similar manner. Both parties were at fault, and the Health Officer was arrested for assault, true bill found against

him, but the case has never been tried. I explained to both persons their duties concerning cases of communicable disease, and do not think there will be a repetition of the dispute.

November 5th, following my investigation of the above dispute, I went to Lower Wm. Penn, W. Mahanoy Township, in response to a telephone message from the Health Officer as to quarantine violations on a premises. Visited these premises in company with our Health Officer and explained thoroughly the regulations of the Department. Learned of another case and went there for the same purpose. When leaving, the Health Officer handed me a copy of a newspaper printed close by, but, owing to the darkness, I was unable to read it. I learned while there that Mrs. M. M. had visited this M. P. family accompanied by a child, the latter not entering the house, but Mrs. M. P. came out of the house and kissed the visitor's child. This woman and child slept that night at home of M. M.

After reaching home and going over the paper handed me, I found that it contained an article on quarantine violations in the Township, and, in order to verify this, went there again November 8th, but could find no evidence of such disobedience, although I made a thorough investigation of all the suspected premises, and the schools, as well as taking up the matter of the visitor above mentioned. Found a privy on the premises first afflicted, in filthy condition, and instructed the Health Officer to disinfect this at once. Owing to the publicity given these cases, thought it well to secure a guard, who went on duty at once. I did not care to remove the guard until all cases were recovered, owing to the fact that most of the families in the village did not understand English, and might break the quarantine regulations through ignorance rather than wilfull desire.

During October a school teacher from Norweigen Township called on me stating that scarlet fever existed on the premises, and asked what could be done in order to allow him to return to school. Ordered our Health Officer to give him disinfecting bath, disinfect his clothes and allow him to take up his residence at his mother-in-law's who lived a short distance from his home. November 5th, Mr. J. H. advised me that this M. O. had the custody of the ballot box to be used in the election of November 7th, and that he was also Judge of Election, and, inasmuch as the polls were located at the H. home, he did not desire to contract the disease by having the ballot box and Mr. M. O. enter his home. He further claimed that on November 5th, Mrs. O., and the patient had visited the premises where Mr. M. O. had removed. He had sufficient proof, so I went to Norweigen Township that night, November 6th), finding that placard had been removed from the M. O. premises, and that patient had visited the P. house as stated. M. O. informed me that our Health Officer had disinfected the entire house, and gave him permission to remove placard

on November 5th or 6th, the onset in the case however, being only on October 18th, 1911. Failing to reach Health Officer by phone, I telephoned the Department and received instructions to use judgment. In order to prevent the Department being used as a catspaw in the local election, I took my disinfecting apparatus, went to the O'Brein home, but found M. O. at the P. household. Disinfected his clothing there, saw that he took disinfecting bath, and also disinfected the ballot box to be used the following day. Replaced placard on the M. O. premises and explained in detail the Department's regulations. All in the W. P. house were adults, so took no action regarding this. I severely censured the Health Officer for his negligence and arbitrary action, but had no further complaint from this section.

Following a telephone message from Health Officer of Porter Township reporting suspected cases of scarlet fever on three premises in Porter Township, deputized Dr. H. A. S. to make an investigation, being unable to go personally on account of epidemic in St. Clair Borough. He examined the suspects on each premises, finding that a number of children had been sick with sore throat and la grippe, several having had physicians in attendance, but found no evidence of scarlet fever. Could learn of no other suspects in the neighborhood, and had no further complaint. It is probable that the sickness of the above children with la grippe, etc., gave rise to the rumor that scarlet fever was present.

MEASLES.

May 25th, received letter from Health Officer of Blythe Township with list of measles suspects at Cumbola, Blythe Township. Instructed him to visit the premises and secure signed forms from householders, which he did, sending one such form and a further statement of suspicious cases who refused to sign. Inspection on June 2nd, checked the householders' diagnosis in the one case. Examined eight cases, finding two children afflicted, and learned that six children had the measles about May 1st, but were all recovered at the time of my inspection. On card stated that Dr. B. had treated his children for measles, and signed a statement to that effect. I called on the doctor and he denied the householder's accusation, saying he treated the child for an injury, and our Health Officer informed me that it was Doctor B. who called his attention to the numerous cases of that vicinity. Instructed Mr. D. in charge of the schools as to the regulations covering school attendance, but as the schools closed for the annual vacation the day following my inspection, and I had no evidence of attendance of patients or contacts, did not order school disinfected.

July 27th, received card from the Health Officer, signed by householder of E. Mahanoy Township, reporting a case of measles. Inspected by deputy, August 28th, confirmed the diagnosis and premises were properly quarantined, etc. September 27, letter from the

Health Officer with card signed by the householder reporting daughter afflicted with measles; also a statement that measles was supposed to exist on a premises in E. Mahanoy Township. Inspection by deputy, Dr. G. J. P., on September 30th, failed to confirm the householders' diagnosis, or to locate any case of measles on either of the above premises. I ordered the Health Officer to remove the placard from the one premises, and made report to the Department.

Letter from the Department December 20th, with copy of complaint from Dr. B. relative to epidemic of measles in Blythe and Schuylkill Townships with instructions to take the matter up with the Health Officer. Called the latter to my office December 23rd and went over matters relating to the supposed epidemic. A Health Officer who had been in office for about three months previous, in charge of Blythe Township, had never done any work, or paid any attention to forms sent him, consequently as the houses were not quarantined, the disease spread. I made a trip through both townships on December 31st, calling on the various doctors and borough Health Officers, confirming what I had already suspected about the negligence of the Health Officer who resigned. Discovered that a greater number of cases had occurred in the borough of New Philadelphia, and that no physician had been in attendance, consequently the cases were not reported, but, at the time of my inspection, several doctors were treating cases of pneumonia which they thought developed after measles. It seems that the residents in this section have a dread of being quarantined, because they do not understand it, thinking it means imprisonment to their homes for a great length of time, and this fear leads to the great majority of them concealing cases of communicable disease wherever possible. Most of the cases complained of, however, were in boroughs over which Boards of Health had jurisdiction, but their methods are very poor and inadequate. All cases reported to our Health Officers, after the resignation of the one mentioned, were properly quarantined. Dr. R. reported to me that he had made a mistake in diagnosing scarlet fever as diphtheria, and securing antitoxin for it, and I instructed him how to act in changing same, and explained matter to Department in order that the records of antitoxin distribution be kept straight.

CHICKENPOX.

April 8th, received card signed by the householder reporting a case of chickenpox, Walker Township, which form had been secured by Health Officer Schock. Deputized Dr. A. B. F. to check diagnosis, which he did on April 9, confirming the householder's diagnosis, also finding one other case on the same premises, which he reported to Health Officer Schock.

February 7th, received card from the Health Officer of Blythe Township, reporting a case of chickenpox, and no doctor in attendance. I wrote him at once for householder's card, which was received and already signed. Deputized Dr. S. on same date to check householder's diagnosis, which he did February 11th, confirming same.

Phone message November 25th, from Health Officer reporting suspected cases of smallpox at Llewellyn, Branch Township. This message came late at night, and the following morning visited the family of J. K., Branch Township, where the disease was supposed to exist, examined six children and parents, finding that three children had evidently not been vaccinated. Four children were afflicted with chickenpox, and I issued cards for cases found. No evidences of smallpox on the premises.

December 10th, Health Officer received a letter from a member of School Board of Butler Township relative to the prevalence of chickenpox in that district. He called me by phone and explained matters, and I instructed him to make an investigation, and, if possible, secure signed cards from the householders, which he did December 12th, first seeing the school teachers and learning that suspected cases were in two families. He visited these families, secured signed forms and on December 14, I deputized Dr. B. to check the householders' diagnosis December 16th, he inspected the suspects, confirming householders' diagnosis in both families, but could learn of no other suspicious cases, although he called on school teachers and made a thorough search.

MUMPS.

April 1st, received form signed by householder reporting mumps on his premises in Porter Township. I deputized Dr. C. V. W. on same date to check the householder's diagnosis which he confirmed April 1, 1911.

December 14th, received form signed by householder of Rahn Township reporting S. V. afflicted with mumps. Deputized A. B. F. to check the diagnosis which he did December 15, examining all the children in the family, but could find no mumps present on the child. Ordered Health Officer to remove the placard from premises and made report to Department.

December 16th, letter from Health Officer reporting investigation on three premises in W. Penn Township upon information supplied by school teacher that mumps existed there. The first two families refused to sign, but the Health Officer was positive that disease existed. In view of this, I deputized Dr. A. B. F. to examine these suspects, and on December 16th he found one child afflicted with mumps on the M. S. premises, two on the L. M. premises, but in the J. S. household, could not locate the boy who was supposed to be sick. He issued card forms to the Health Officer for the cases found, which were all properly quarantined.

WHOOPIING COUGH.

February 19th, received letter from Department with communication from the Health Officer relative to whooping cough in vicinity of Bachert's School, E. Brunswick Township, with the suggestion that I take action in the matter. Several days later, Health Officer called at my office, and I secured from him detailed information as to suspects. It was supposed that some cases in that vicinity had not been reported by physicians who attended. I thought it advisable to secure a physician not practicing there, and accordingly secured Dr. C. W. G., of Sch. Haven. He made this investigation on February 22nd, and after a thorough examination of all the suspects, could not establish a diagnosis of whooping cough on any. There were several cases in the neighborhood that had been properly reported, but the cases suspected by our Health Officer did not have the disease.

September 16th, letter from the Health Officer advising that a case of whooping cough existed on the premises of C. P. in Walker Township, but householder had refused to sign the card. September 20th deputized Dr. A. B. F. to examine this suspect, which he did September 21st, finding a nine-year-old girl afflicted with the disease, which he reported to the Health Officer on the card form.

In all the foregoing cases, proper action was taken following any inspection or examination that confirmed or did not confirm diagnosis, or located new cases, and all cases were watched until recovery and disinfection, but I am glad to say there was never any trouble after our inspections.

INVESTIGATIONS WITHOUT INSPECTIONS.
CHICKENPOX.

Letter January 31st, from the Health Officer stating that he had received an unsigned card requesting disinfection of the premises of M. W. S., E. Mahanoy Township, for chickenpox, but that these premises had never been reported to him. Ordered him to visit the premises, and if 21 days had elapsed from date of onset of last case in the family, to secure card from the householder, and then disinfect. I sent him statements to have householder sign if a physician had been in attendance, setting forth this fact, the dates Doctor was there, and his diagnosis of the case. We secured the card form and disinfected, and also found that Dr. W. had treated the case on January 4th and January 16th, and informed householder that the disease was chickenpox, but had never reported the case to our Health Officer. He had householder sign our statement which was forwarded to Department with our report of February 7, 1911.

DAIRY FARMS INSPECTED FOR SCARLET FEVER.

During my investigation at Ringtown March 13th, for suspected cases of scarlet fever, I learned that the family of F. P. R., Union Township, had dairy on the premises and sold milk. I inspected

these premises and explained the methods by which the sale of milk could be continued, but they were averse to transferring stock, and decided not to sell any, as they were able to use all the milk obtained in the home. Had two cows, yielding about 10 quarts per day. Householders perfectly willing to do everything possible to avoid infection of others.

October 3rd, received report from the Health Officer, of a child aged six years afflicted with scarlet fever on a dairy farm in Butler Township, stating that no milk was sold. Inspected October 4th, and found they had 18 cows, yielding 90 to 100 quarts daily, which were retailed in Ashland, no butter being sold. Milking done by hired man and mother of patient, the latter driving team and selling the milk. Patient nursed by grandmother. Six children in family, three attending school. Milk house 90 feet from house, water being obtained from spring about 80 feet from house. Barn 150 feet away and 100 feet from milk house. Water supply O. K. Patient kept in room isolated from others in household, and I instructed the mother to have her clothes disinfected (to be done by the Health Officer) to take disinfecting bath and remove to a neighboring farm, conducting the sale of milk from the latter place, and not to come in contact with anyone from premises where the disease existed. Explained how to handle milking utensils, and how the disease might spread through negligence in running the dairy. They were rather obstinate, but I phoned the Health Officer to see that the above instructions were carried out, and he attended to the matter the same day, advising me by phone that mother and father had their clothing disinfected, took disinfecting bath and removed to one of the numerous outbuildings. He complained about the mother's stubbornness, and, as they had no means of cooking in the outbuilding occupied, and fearing they would go to the house for this purpose, I ordered him to see that they removed to a neighboring farm owned by a relative.

Following receipt of card from Health Officer reporting scarlet fever on dairy farm in Butler Township, made an investigation on October 15, finding four children on the premises, two of school age. Have four cows yielding 30 quarts daily, which is generally retailed from can in Frackville, twice daily. No butter sold. Milking done by father, patient nursed by mother, who had taken excellent precautions in the sick room. Milk kept in spring house about 60 feet from house. Milking utensils were not properly taken care of prior to onset of disease, but since then they have been scalded with hot water, obtained from house. Water supply O. K. Barn insanitary and dark, pigs being kept in same building, separated from cow stable by a board partition about three feet high. Discharges from sick room disinfected properly, but finally reached open ditch lead-

ing to a creek about 160 feet distant from said ditch, which stream was tributary to Mahanoy Creek. Ordered householder to discontinue this manner of disposing of human excrement, and to bury same, at proper distance from stream, which he promised to do. As they could not secure any one to do the milking, and Mr. R. did not want to transfer stock, it was decided to stop the sale of milk until premises were released from quarantine, Mr. R. being entirely willing, as all surplus milk could be fed to pigs.

Learning that patient had attended "Payne" or "Frackville Road" school in Butler Township, which was also attended by patient on G. W. premises above mentioned, I visited the school teacher. Learned that total enrollment was 17, highest attendance 14, less 5 absentees on account of scarlet fever, equaled 9 at time of my visit. The G. W. child became sick at school and was sent home, and later developed scarlet fever. The T. R. child was a playmate of this boy, and also contracted the disease, probably from contact with the original case. Water supply in open buckets in school room, and all pupils use common drinking cup, except the T. R. children, who had their private cups. Ordered school closed and disinfected, which was done October 19th. The G. W. children had taken books home from school and I had our Health Officer burn these books. Took up with school board the question of providing closed water containers for school rooms and having each child use own drinking cup, and found board willing to adopt this system, and eager to do anything to stop spread of communicable disease among the children.

Following telephone message from the Health Officer and card from reporting scarlet fever on a premises in Butler Township from which milk was sold, made investigation October 29th, found five in family: husband, wife, two children and servant, one child having died of scarlet fever October 26th, 1911.

Had 11 cows, yielding 80 to 90 quarts daily which were retailed in Ashland and Girardville. Milking done by father and patient nursed by mother. About 40 feet from house was a small work shop and milkhouse, which Mr. S. fitted up and took up his residence there during the continuance of the quarantine, conducting sale of milk from there. Took meals with a brother, living short distance away. Milk placed in cans and stood in water trough to cool, afterward being placed in milkhouse. Had been securing hot water from house to wash utensils, but I advised him to stop this, and get hot water from his brother's house, which he promised to do.

Water supply insanitary, and I instructed the householder how to remedy this defect. Privy too close to spring, and I explained the danger of pollution. Showed householder proper method of disposing of human excrement from sick room, and he was willing and anxious to do whatever was right. After thoroughly going over with

him the regulations of the Department and the necessity therefor, I allowed sale of milk to be continued, under the existing conditions. Patient had attended Broad Mountain School, Butler Township, which was then closed on account of County Institute. Children from this household did not mingle with those from other afflicted premises, the nearest being about two and one-half miles away, and I could learn nothing to show the source of disease. Saw school teacher and found that no pupils had been absent during the term on account of sickness.

Upon receipt of card reporting scarlet fever on the premises of G. M. S., Porter Township, stating that milk was sold, I deputed Dr. H. A. S. to make investigation, instructing him as to how it should be done. Inspection December 18th, finding patient properly isolated and nursed by mother. Seven cows, milked by householder and daughter. Milk not taken into dwelling, and neither father nor daughter came in contact in any way with patient or nurse. Milkhouse 150 feet from house. Sell about 25 to 30 pounds of butter weekly, but no milk. Utensils properly cleaned and not taken to dwelling. Condition of barn O. K. and attitude of householder excellent. Allowed sale of butter to be continued under existing conditions, which were very good.

ACTION TAKEN WITHOUT INSPECTION.

Following receipt of card from Health Officer reporting scarlet fever on the premises of W. R., Butler Township, stating that milk was sold, I called the Health Officer by phone, and found that the father drove a milk delivery team for his mother, who lived in the adjoining house with another brother, but since onset of the disease, the other brother has been driving team and W. R. is under quarantine on his own premises. In obtaining milk from adjoining premises, the residents of afflicted house place pitcher outside, and the brother fills this with milk, the pitcher later being taken into house. Health Officer advised that quarantine regulations were being strictly obeyed, and under the circumstances did not think it necessary to make an investigation of the premises. Instructed Health Officer to see that rigid precautions were observed until the removal of quarantine. No complaint about these premises after establishment of Department's regulations.

DAIRY FARMS INSPECTED FOR DIPHTHERIA.

January 7th, form reporting diphtheria on A. Z. premises, W. Penn Township, came to hand stating on same that milk was sold in Tamaqua. Being unable to go there at the time, deputed Dr. A. B. F., to make an investigation, instructing him as to the necessary and proper action. He did this work on January 9th, finding six

persons in the house. Patient confined to room on second floor, mother in attendance, both being isolated from remainder of family, who occupy first floor, sleeping in second floor, but not coming in contact in any way with patient or nurse. Have five cows in large ventilated barn 150 yards from house, and obtain 25 quarts per day, from which 12 pounds of butter are made weekly. Butter, however, was made at home of the married son living close at hand. One son, O. J. Z., had sole charge of milking, being assisted at times by younger brother, who will not do anything more in this connection until after disinfection. Utensils kept in separate building. Water supply O. K. Arrangements made to have oldest son take disinfecting bath, have clothes disinfected and live at a brother's, handling milk from there. Quarantine regulations explained to householder, who promised to obey. Upon receipt of Dr. A. B. F.'s report, ordered our Health Officer to see to the disinfecting bath, etc., but on January 14, Health Officer advised me that householder had decided they would rather not sell any milk, being afraid of communicating the infection. Had it definitely understood that nothing in this line was to be sold from premises until after disinfection, and it was gratifying to find a householder willing to do this, in order to prevent spread of disease, and it speaks well for the educational value of the Department policy.

Following receipt of form from the Health Officer reporting a case of diphtheria on a premises in Norweigen Township, stating that milk was sold in Pottsville, made an investigation May 7th, finding they had 17 cows yielding 100 quarts daily, from which only enough butter was made for the family consumption. Milk properly cooled and sold in bulk to a brother who retailed it from can and bottle in Pottsville. Stable in good sanitary condition. Father of patient and a helper do the milking, and were living in shed about 250 feet from house, taking meals at sister-in-law's. Health Officer informed me that he had disinfected householder's clothing, given him disinfecting bath, and he then took up his residence in this shed. I explained thoroughly the regulations of the Department covering such cases, and, inasmuch as there was no contact between the milk handlers and rest of the family, allowed sale of milk to continue. Milk for family use taken from milk cooler in can, and poured in a crock set outside house. Water supply O. K. The Doctor in attendance refused to give baby antitoxin on account of being too young, and patient died the day after my inspection.

November 4th, upon receipt of form reporting diphtheria on the premises of G. W. R., S. Manheim Township, stating that milk was sold, I made a thorough investigation, with the following results: six in family, youngest three years old, being afflicted. Three cows yielding 20 to 25 quarts daily, some of which was sold in Sch. Haven

on market days, together with about 14 to 16 pounds of butter weekly. Milk retailed from large can. Milking done by father, and the mother and a 13-year-old girl do the nursing. Water supply O. K. Outhouse in very bad condition, having no sump. Advised householder to build proper sump, and to cover discharges already on ground, which he promised to have done at once. Discharges from sickroom properly handled. Learned on arrival that two of the cows had already been transferred to neighbor's and one kept for use of household, no milk or butter to be sold from afflicted premises. Very mild case and patient had freedom of house. Instructed parents to isolate patient, explaining reasons therefor, and he agreed to this. Could learn of no contacts attending school, or the cause of the disease. Explained in detail the regulations of the Department, and the necessity for the same. Well about 20 feet from house, and, owing to danger of waste water from house getting into same, I cautioned them against using water from it, unless it was first boiled. Householder's attitude excellent.

November 25th, following receipt of form reporting a case of diphtheria on a premises in North Manheim Township, stating that milk was sold, made inspection as follows: seven children at home, four school children, all attending same school one-half mile distant. No other children from this school, or in neighborhood, afflicted. Patient exposed to dampness and rain prior to onset. Four cows, yielding 14 to 15 quarts daily, which were sold twice weekly on market days, by measure from cans. Daughter, age 13, did milking, while mother and patient were isolated in room on first floor. Barn dark and insanitary, about 200 feet from house. Milk was kept in cellar of house during summer, but at the time of inspection, was in milk house adjoining house. Water supply O. K. On account of proximity of milk house to residence, and the fact that all the family are constantly going from dwelling to milk house, I considered it dangerous to allow sale to continue, and as householder did not want to transfer stock, or use other methods of handling milk, it was decided to stop the sale of milk entirely, as they could easily use the surplus milk. Householder promised to obey the Department's regulations in future.

DAIRIES.

DIPHTHERIA.

ACTION TAKEN WITHOUT INSPECTION.

Following receipt of a form reporting diphtheria on a premises in Porter Township, stating that milk was being sold, I got in telephone communication with the Health Officer who stated that the householder had two cows, one of which he was going to transfer

to a neighbor, and keep the other for use of his own family, no milk to leave the afflicted premises. In view of this did not deem it necessary to make a personal inspection.

April 25th, received card from Health Officer reporting diphtheria on premises in South Manheim Township stating that "no butter sold at present." Took this up at once to learn exactly what the householder intended doing, and householder advised me that they would sell no butter or milk until after disinfection, therefore I did not make personal investigation. On these premises, all the children later contracted the disease, and owing to poor circumstances of the family, I instructed Health Officer as to Order of Relief, which was issued.

September 3rd, letter from County Medical Inspector of Berks County that a party in Perry Township where diphtheria existed, was shipping milk via P. & R. Ry. to Pottsville, and being retailed here by a local milk dealer. Communicated at once with Pottsville Health Authorities giving them the facts in the case. They saw the milk dealer supposed to be handling this milk, who denied dealing with F. H. Further investigation revealed the fact that this milk was shipped to a dealer in Shenandoah, Pa., but by the time this was discovered, the F. H. premises had been disinfected, therefore, nothing could be done with regard to stopping the sale of such milk.

DAIRY FARM INSPECTED FOR TYPHOID FEVER.

April 28th, following receipt of a card reporting a case of typhoid fever in West Penn Township with letter advising that milk was being sold to laborers working on new railroad then being constructed through that region, I made an investigation of these premises. Patient was of opinion that he contracted disease from eating oysters either in Tamaqua or Coaldale. He had been in contact with no typhoid fever cases, but moved to W. Penn from Summitt Hill about beginning of March. Three cows, yielding 13 quarts per day, no butter. Milk was formerly retailed in Tamaqua, but since illness, it has been sold only to the laborers on the railroad. Stable insanitary. Water from well 30 feet deep, stone lined, top boards loose. Human excrement properly disposed of. Ordered sale of milk stopped until after disinfection, as they did not care to adopt other methods of continuing the sale. Householder advised to disinfect well, as instructed in Department manual, which was done, as this well was located in barnyard and, on being tested at Department's Laboratories, was found to contain bacilli coli. Householder's attitude very good.

September 17th, having received card and letter from Health Officer that typhoid fever existed on a dairy farm in Pine Grove Township and that the Health Officer had stopped the sale of milk,

I made an investigation of the case, as follows:—13 cows yielding about 200 quarts per day, which were retailed in Pine Grove by bottles and cans, no butter being sold. Milking done by a cousin and a sister of the patient. Found house infested with flies. Well about 50 feet from privies, on higher ground and stone lined, having tight board cover. Human excrement but superficially buried, although proper distance from water. On account of the thin covering, flies had easy access to this, and I instructed household to dig a trench at least one foot deep and to cover discharges with lime, which he promised to do at once. Barn insanitary. No milk was being sold, the surplus being fed to pigs, 17 in number. I explained how they could proceed in order to allow sale to continue, and instructed them thoroughly as to the regulations of the Department. Householder not home at time of the inspection, but I wrote him September 19, instructing him to clean up his yard and barn, and maintain a better standard of cleanliness in his dairy operations. Adults at home seemed entirely willing and anxious to do anything possible to prevent spread of disease. Water from well analyzed at Department's Laboratories, and found to contain 1,800 bacteria per C. C. and 5 B. Coli per C. C.

DAIRIES.

TYPHOID FEVER.

Action taken without inspection.

April 21, received letter from Health Officer and card form reporting typhoid fever on a premises in Walker Township, stating that no milk was then being sold, although they kept two cows and made butter selling about 6 pounds weekly, butter being kept in cellar of house. Householder is patient. Mother did milking and butter making and also nursed patient. Wrote Health Officer April 22nd, instructing him to stop the sale of butter, and to advise at once to whom any was sold since onset of disease. Learned later that no butter was sold since illness, as Mr. H. F. always took his own products to market. Wife assured Health Officer that they would not sell milk or its products until after disinfection.

DAIRIES.

Action taken in case of measles.

February 17th, received card reporting measles on a premises in Ryan Township stating that milk was sold in Mahanoy City to a hotel. Called Health Officer by phone to learn whether quarantine regulations were being observed, and later called householder himself by phone. He advised me that he had 5 cows, yielding about 30 quarts daily, which were sold to the Kaier Hotel, Mahanoy City. Patient properly isolated, father doing milking and mother nursing,

after explaining the regulations of the Department, and arranging for the proper handling of milk, I gave him permission to continue the sale of milk.

FOODSTUFFS, LIQUORS, etc.

Action taken in cases of communicable disease on premises from which foodstuffs, liquors, &c., were sold.

SCARLET FEVER.

Upon receipt of card reporting scarlet fever on a premises in Porter Township stating that a bottling plant was located here, I got in telephone communication with Health Officer. He informed me that he had given householder disinfecting bath, disinfected his clothing and allowed him to sleep in bottling works, and continue his work. Three in family, father, mother and patient, and it seemed that the mother who nursed the patient would also have to cook for the husband and in this way come in contact with him. I arranged with Health Officer to have the father take his meals elsewhere. From a rough sketch of the premises secured from Health Officer, I learned the bottling room is in basement, patient being isolated on second floor. Had hot water, heating plant &c., in bottling room, so there would be no inconvenience to householder. With the understanding that householder was not to come in contact with anyone from the patient's room, or allow them in the bottling room, I allowed the sale to be continued.

October 20th, received letter from the Health Officer stating that scarlet fever existed on a premises in Butler Township householder of which drove team for brewery, and also conducted pool room and tobacco store in small building adjoining house. Health Officer had instructed him to close this pool room. October 21st, sent Health Officer copy of (Form 4) with marked passages showing what action should be taken in case the man wished to continue his pool room and the sale of cigars, &c., but the latter would not re-open, and, although in possession of a permit, decided not to drive the brewery team, fearing it might injure his trade. Health Officer further advised that they were carrying out instructions to the best of their ability, and in view of their evident willingness to do anything in their power to prevent the spread of the disease, I did not think it necessary to make an inspection.

DIPHTHERIA.

Following receipt of card form reporting a case of diphtheria in Porter Township, and stating that the householder was a "Bottler," I got in communication with the Health Officer. He stated that householder remained in the quarantined house until given a disinfecting

bath, had his clothes disinfected, after which he removed from house, and will conduct the bottling works without coming in contact with anyone from the house.

During his confinement he had a man from Harrisburg doing the bottling, who stayed at a Hotel, and did not come in contact with anyone from the house. Bottling house is 60 feet away from the dwelling. In view of this, allowed the bottling work to be continued and did not deem it necessary to make a personal inspection.

STREAM AND WATER SUPPLY POLLUTION.

Following receipt of form reporting typhoid fever in Pine Grove Township stating on same that privies were but 25 feet from well, I communicated with Health Officer as to possibility of drainage getting into well. Learned that well was stone lined, but without mortar, and that about 4 weeks prior to disease, water in well had a very bad odor. Privy in poor condition, and as ground slopes from privy to well, it seemed possible for drainage to get into well. Wrote the owner of the premises, advising that privy be removed at least 100 feet from well, and reported condition to Department, suggesting that water from well be analyzed. This was done by Department, finding 250 bacteria per C. C. and 36 bacteria coli per C. C. Owner and tenant notified.

April 26th, While returning from a Dairy inspection in W. Penn Township noticing a dumping ground on the eastern limits of the Borough of New Philadelphia located along the public highway on the bank of the Schuylkill River. All sorts of rubbish were being dumped there. Complaints had been made about it in 1910 and its proximity to the public road and the river rendered it a menace to the public health. Received instructions from the Chief Engineer of the Department to place warning cards, and take the matter up with a view of abating the nuisance. Notices were posted. Dumping, however, still continued up to the beginning of June, I took the matter up with the Chief Burgess of the borough, who was also the representative of the land owner. He offered to have the dumping transferred to a pool of stagnant water adjoining the river, but having no outlet to same, and to station a man on the ground to burn all vegetable and animal matter. Upon forwarding his offer to the Chief Engineer, received instructions that provided the Borough lived up to its promises, it would be satisfactory to dump it into this latter location. Then secured written promise of proper precautions against stream pollution from the Borough, and notified Chief Burgess June 29, that the plan adopted by the borough would be satisfactory, but upon any violation of it, the dumping in this vicinity would be stopped permanently. Have had no further complaints at this writing.

Six cases of typhoid fever occurred in Pottsville during September among workmen erecting a new building on the south side of the main street, and upon investigation I discovered that a spring emptying on to the Philadelphia and Reading Railway is located close to this building, and the employees had been using it for drinking purposes. This spring was a continuation, or at least from the same source, as a spring used to supply a public drinking place on this main street which was closed several months previous as bacilli coli were found in the water. I suggested that samples of this water be secured and analyzed at the Laboratories of the Department, but the spring was closed and boarded up by the local Board of Health before this could be done. There is, however, little reason to doubt that this was the source of infection, as the men lived in different parts of the town, and the only water supply common to all of them, was the spring in question.

October 19th, Information received at this office that a privy on a farm in W. Norweigen Township was located directly over a small stream emptying into the west branch of the Schuylkill River at a point about 300 feet west of the privy, passing under the tracks of the M. H. & S. H. R. R. before reaching the river. After confirming the information, learning that there was no vault of any kind, the human excrement going directly into the creek, reported the matter to the Chief Engineer, who in reply stated that the Health Officer had been instructed to have the nuisance abated.

DRAINAGE INSPECTIONS.

March 8th, received letter from the Department with copies of correspondence from a resident of Sheppton, Union Township, relative to drainage in that town, and stagnant water in the streets, with instructions to make an investigation. March 28th, visited Sheppton, and made a complete inspection, finding that complaint was well founded, but that the complainant himself, aided in filling this pool of stagnant water. The premises complained of were located directly opposite the home of the complainant, the drain having been changed as the result of a former inspection here, to carry the waste water into the gutter of the main street. Owing to the poor condition of these gutters, the water was not carried away, but allowed to become stagnant the pool being in front of the complainant's home. From a general examination of the town, it seems that nearly all of the houses dispose of the surface waste water in such manner that it eventually finds its way into the street. All the houses have privies and sumps, and while several of these were filled and in bad condition, the contents did not get into the street. Some parts of the town had sewer connections, but not that part complained of,

and there appeared to be two possible solutions of the problem:—

First,—To extend the present sewer to the south so as to allow the premises in question, as well as the other houses, to connect with it.

Second,—To have the gutters put, and kept, in such condition, as to allow this waste water to drain away naturally, as the street had sufficient pitch to conduct all the water, if the gutters were kept clean and even. I ordered the several sumps cleaned and kept in normal condition, and ordered one householder who had no sump, to excavate for one, as the excrement was allowed to remain on the surface. An effort will be made to remedy the trouble.

During June, after much correspondence, received another complaint about the same premises as above, and made a second investigation June 19, calling on the Supervisors of the Township. I prepared rough sketches showing location of streets, existing sewers, drains and premises complained of. Found about the same conditions as on my former visits, and put it up to the township Supervisors that it was their duty to see that this nuisance was abated. They claimed, however, that the main street was 80 feet wide, and that the township had jurisdiction over 33 feet, the stagnant water in question being outside of their authority. However, as this water crossed a side street before reaching complainant's house, I notified them that they were violating their duties by allowing this, and notified complainant that he could, in my opinion, hold them liable for this nuisance. After giving the Supervisors to understand that if they could not push the question of extending the sewers, it was up to them to conduct this water off the public highway. After much correspondence, it appeared that no one property owner would make the first move towards connecting with the sewer. About December 1911, I learned from the Supervisors that the gutters at that time were in fairly good condition, and that the property owners in some places filled up the road in front of their houses, with earth. The Supervisors referred me to the township Solicitor for information, and I took the matter up with him, but have been unable at this writing, to get a reply. Complaints have not been renewed since June 1911.

DRAINAGE (No inspection).

September 9th, The Health Officer of Foster Township called at my office, relative to a case of diphtheria in that district, which was located opposite a large pool of stagnant water, that, in his opinion was a menace to the public health. An abandoned railroad grading crosses the public road at this house, the road running north and grading northwest and southeast, pitching towards the southeast. A culvert under the road carried the drainage along this grading, but the culvert was blocked at the time, causing the pool of stagnant

water referred to, which extended for some distance along the grading. Mr. B. had a letter of complaint from a resident who intimated that the attending physician of the diphtheria case, had considered this water detrimental to the health of the people residing in the immediate vicinity. Reported the matter to Department and received instructions to proceed. Took the matter up with taxpayer's association, who have charge of the roads in the township, and after some correspondence, learned that the culvert had been opened and the ditch along side of the old grading cleaned for several hundred yards on each side of the public road, the water flowing away undisturbed. No further complaints.

BOROUGH INSPECTIONS.

GIRARDVILLE.

During January information reached this office that two cases of scarlet fever existed on the premises of W. C. Girardville with an interval of about one month between the end of the first case and onset of the second. While the house was placarded, the householder was compelled to buy the disinfectants and to fumigate the premises. Took steps to secure full information in the matter and reported same to the Department January 3. Following a phone conversation with the Department I made an inspection of this borough on January 8, found that health matters were looked after by a sanitary committee of three members, and that there was no system whatever about this work, in fact, the committee was not at all active, and matters were allowed to take their own course. Upon the premises mentioned above I confirmed the information, and learned that three children from this house attended school. One girl, the patient, started school January 5th, and upon examining her, found desquamation taking place. Called on the President of Council, instructing him to have all children from said premises stop school at once and not be readmitted without certificate from physician. Took up the question of having a Board of Health organized, which, considering that the population is about 4,800 was highly necessary, particularly so, as the Sanitary Committee was practically useless. Explained the Department's quarantine regulations and the necessity for same, and discussed thoroughly the matter of a Board of Health. He promised to give this subject proper attention.

During August, had some correspondence with the Sanitary Committee relative to physicians reporting cases of communicable disease in Girardville, and learned that no Board of Health had been established, although it had been discussed at the Council meetings several times. During October, the question again came up, and I learned of some very lax methods in a case of scarlet fever. After reporting

the matter in full, it was decided by Department October 14th, to take charge of this borough until a Board of Health was organized, and since that time our Health Officer had added this borough to his district.

SHENANDOAH.

January 20th. Had telephone conversation with the Department relative to conditions in Shenandoah, where scarlet fever and diphtheria were prevalent, and on January 22nd, made an investigation of this epidemic. Found that since January 1st, 17 cases of diphtheria and 28 of scarlet fever had been reported. Went over the system in use there to prevent the spread of communicable disease, and made such suggestions as seemed necessary and proper. Found the Health Officer harboring certain delusions about the proper quarantine periods, and it was impossible to convince him he was wrong or to explain the proper precautions. Found that citizens paid small attention to their quarantine regulations, and I learned of one public funeral and several other instances of violation, but the Health Officials did not care to prosecute the offenders. I suggested that the arrest and conviction of one person would bring about a cessation of the constant infractions, and recommended the adoption of a good thorough method of reporting and quarantining, as well as the use of a better disinfecting apparatus. Visited School Principal, and discussed with him the best means of preventing infection through attendance at school. Later I sent the Health Officer samples of our (forms 34) asking that they model their forms for reporting, after these cards.

During May, on the 29th, following a conversation with the Department by phone, went to Shenandoah to investigate the numerous cases of scarlet fever and diphtheria existing there. From the Superintendent of Schools learned that about 100 children were out of school at that time, on account of the above disease, as they were sent home whenever a case occurred in the household. Seven school rooms had been closed, and any room in which a pupil has attended within 24 hours of the development of scarlet fever or diphtheria, was disinfected. Found that there was considerable friction between the Secretary of the Board of Health and the Health Officer, and no harmony whatever in the Health organization. School officials were doing their best to check the disease, but the lax quarantine and poor system in general, seemed to be responsible for the prevalence of the disease. Went over the entire matter with the Health Officials and gave my ideas as to proper manner of handling the epidemic, quoting from the Department regulations and various circulars.

TAMAQUA.

On receipt of instructions from the Department to investigate epidemic of scarlet fever in Tamaqua, went there June 2nd. Met President of Board of Health and Superintendent of schools. Population about 9,000 and from April 24th to May 31st, 33 cases had been reported, chiefly from the East Ward. Fifteen children afflicted, and there were school children on 24 of the infected premises, all pupils of the East Ward school, cases being about evenly distributed among the different rooms. Instructed school officials that where a pupil develops the disease within 48 hours of his or her attendance at school, to close the room and have it disinfected as instructed in the Department's circular, which I mailed him on my return. Among the householders of afflicted premises, found one grocery man and one milk man. The former's store was closed and kept closed, and the latter obtains the milk from a farmer and retails it from cans. Stays away from his home which is quarantined, and took disinfectant bath and had clothes disinfected before leaving, but the methods in such cases were crude. One breaker of quarantine had been arrested, and the Health Officials asked my advice in the matter. His Attorney, from his experience in the case of Commonwealth vs. A. (see 1910 report) had suggested that he settle the case and I informed the Board, that in my opinion, if the defendant paid the costs, they waive the fine, and if possible, have the sentence suspended, to insure good behavior in the future. Eight guards were on duty, two by day and two by night in the East Ward, and the remainder in other parts of town, and if necessary, the officials advised me they would put others on. I explained in detail the regulations of the Department of Health and the best methods to be used in combating such an outbreak. All of the officials, both health and school, were doing everything in their power to check the disease, and, in reporting to Department June 5th, I suggested that the regular package of circulars, etc., for Boroughs be sent to the President of the Board of Health. June 10th, I made a second trip to learn what progress was being made, and found all concerned making an energetic fight, with the tide just turning in their favor. Left my disinfecting apparatus there, to be used as a pattern for some they were having made. All the schools and moving picture houses had been closed, and, with a better understanding of the necessary precautions, the officials have been able to do effective work. Learned later that 41 families had been quarantined before the schools were closed June 8th, and 12 afterwards, and on July 19th, but 8 cases were still under quarantine.

ST. CLAIR.

December 12th. Had a telephone call from the Health Officer of St. Clair Borough, asking best methods to pursue to stop spread

of epidemic of scarlet fever in that borough, among school children. Thirty cases reported to that date, nearly all mild. I suggested medical inspection of the schools to locate unreported cases, but the Health Board were having a meeting on that date, and he promised to take it up with them. December 17th, the Secretary called at my office, and I went over, with him, the situation there, and later attended the Board of Health meeting at St. Clair on same day. About 42 cases had been reported since November 1st, about three-fourths of which, it was estimated, occurred in families from which children attended school.

All schools and moving picture houses had been ordered closed, and the churches allowed to hold but one service on that day. The school board president refused to co-operate with Health Officials. My conclusion, after a lengthy discussion of the matter, was that the trouble originated in mild cases, where the services of a physician were not necessary, and consequently these cases not reported were allowed to roam at will. The Health Officials were willing to do anything in their power, but were undecided as to what course to pursue. I explained the quarantine regulations of the Department and the necessity for same, suggesting that they be adopted in their Borough. In order to unearth the source of infection I asked that they call a meeting of the school teachers, all bringing their enrollment books with a record of the absentees. To have truant officer look up the absentees, and those not having a good excuse, or where anything suspicious was observed, and be examined by a physician. I pointed out that if one or two cases were discovered in this manner, they would report others, and in this way the key to the situation could be secured. I advised friendly dealings, but explained the power they could yield, if necessary. On December 20th, I learned that the Board had followed my suggestion as to medical examination of all suspicious absentees, finding one case of measles, one of chickenpox and 5 scarlet fever unreported. What was considerably more important, however, was the fact that two cases of scarlet fever were on premises of a butcher, onset about November 23d, and one on premises of milkman. As these houses were not quarantined, patients were allowed to go about the houses, and as both the milkman and the butcher sent their delivery wagons to all parts of the town, the cause of the epidemic was plainly seen. The Health Officials were rather lax in adopting proper method of treating these two cases, although all those hiding the disease were arrested and fined. Moving picture theatres and churches allowed to re-open following the discovery of the above cases. I sent (circular 4) to the Health Officials, and learned later from the Secretary of the Board of Health that they had followed these instructions in dealing with the butcher and milkman. No further trouble, as the spread of the disease stopped upon the finding of the above cases.

MIDDLEPORT.

September 28th. Received information that the Board of Health of Middleport had disbanded, as the Borough Council refused to grant an appropriation for carrying on the work. I also received a card reporting case of scarlet fever in that borough, and ordered our Health Officer for that district to placard the premises, place them under quarantine and report the matter to the Department. Received instructions from the Department October 2nd, to take charge of the work in this borough until a new Health Board was organized. Looked after matters here until January 4, 1912, when a Health Officer was appointed after constant hammering at the Boro. Council, and we turned all cases over to him. Took up with this Health Officer the Department regulations and furnished him with copies of all circulars, &c., and think the health matters there will be well looked after.

MISCELLANEOUS.

November 13th. Health Officer called me to the phone, relative to scarlet fever in Butler Township and particularly on account of the T. R. case. A woman of Gordon was in the house at the time a second case developed, but returned to her home, despite the instructions of the attending physician. Ordered the Health Officer to notify Secretary of Gordon Board of Health, giving him the facts in the case. He did this and reported that she had been given a disinfectant bath, had her clothes disinfected, and been kept under observation. No trouble from this source.

May 25th. Had letter from Health Officer in Blythe Township that an undertaker at New Philadelphia had a funeral at Brockton, death resulting from tuberculosis and a skin disease, the corpse turning black immediately after death. After preparing body for burial, he threw the ice into the gutter and the children in the vicinity made use of it. Wrote the Health Officer at once, instructing him to get name of the deceased, dates &c., and reported the matter to the Department in detail May 27th, the Health Officer learning that the disease was pelagra.

Following instructions from Chief of Laboratories at Philadelphia on September 24th, went to Coaldale to obtain samples of blood from R. S. afflicted with infantile paralysis and to obtain a history of the case. Had a lengthy interview with the parents and secured a complete history of the case, as well as the blood specimen, which was sent to the Department laboratories.

COMMENT.

One of the most important features of this annual report is the change in the attitude of householders in general. While several were antagonistic and stubborn, the great majority evinced a willing-

ness to do anything possible to aid in preventing the spread of communicable disease. This is particularly true on premises from which milk or its products are sold, the householders in many cases refusing to transfer the stock or have an outsider do the milking, preferring to stop the sale entirely, rather than subject the public to any risk, however slight.

The explanations of the Department's regulations and the necessity therefor, have, in practically all cases, been received with understanding and thanks, and I cannot recall an instance in which any trouble arose after the full establishment of the Department's regulations.

Another illustration of how the public is coming to appreciate the good work of the Department, lies in the greater number of householders who voluntarily report cases of communicable disease not under the care of a physician, in order to have their premises properly quarantined.

A number of borough Health Officials have, at various times, requested advice and information as to checking the spread of contagious disease, and in each instance we have endeavored to assist them in every possible way. In some cases, we found their rules and methods somewhat lax and less than the minimum requirements of the Department, but, after showing how the disease might possibly spread through just such laxity, in nearly every such case, it was decided to adopt all the Department regulations, and I am glad to say there has been considerably less trouble in such Boroughs since that time. In the numerous epidemics occurring in the Boroughs in this County sometimes as high as 40 or 50 cases have been reported before the officials called at this office or brought the matter to my attention, and one of the most convincing proofs of the effectiveness of the regulations, is the fact that in practically every instance where these rules have been enforced in full, the spread of the epidemic has been checked and control obtained in a short time.

Another feature of the development of our work in this County, is the co-operation of the school officials and teachers. We have never had any difficulty in obtaining information as to school attendance when a contagious disease was prevalent among pupils, and, when considered necessary to have schools closed until disinfected, the officials have complied promptly and efficiently. In fact, the existence of several epidemics of the milder cases of communicable disease was brought to my attention by school teachers, which, otherwise would probably not have been reported, as no physicians were in attendance.

Whenever a report of typhoid fever is received, the condition of the water supply is at once learned, and anything indicating the pollution of the same, is at once taken up and when necessary sam-

ples of the water have been obtained and analyzed at the Department's Laboratories, the results being transmitted to the householder, enabling him to take steps to purify the water and avoid a repetition of the disease. This work has shown that the disease in almost all cases, could be attributed to the use of impure water and the residents under the jurisdiction of this office, are becoming aware of this and taking action to prevent it.

Our Health Officers are frequently reminded by letter to give all possible information on the forms, that would tend to show the source of the disease, and how it might be spread by the employment of the wage earner or other means. The forms are carefully scrutinized here and where householder or other wage earner is employed in an establishment where he handle foodstuffs, cigars, cloths, &c., proper action is at once taken to prevent infection in this manner.

As may be seen in several paragraphs of the foregoing report, particular attention is paid to school attendance, as this has been the cause of the spread of disease in a great many cases. The dates of last attendance of patients and contacts are learned, and compared with dates of onset, and, when necessary, the schools have been closed and disinfected, after which, in almost all cases, it is gratifying to note that the number of cases decreases considerably.

It has been the policy of this office to remove quarantine as promptly as consistent with the regulations of the Department and the condition of the patient, as an unnecessarily long quarantine period naturally incenses the householder and leads him to conceal other cases whenever possible, a result I have always tried to avoid. Certain letters of instruction covering certain phases of the work, are sent out from time to time to our Health Officers, in order to keep up the standard of their work, and when their duty is not clear to them, I have taken pains to explain it thoroughly, and I am greatly pleased with the co-operation of the majority of them, and the splendid results they obtain.

I have endeavored to make all our work educational, and to avoid harsh measures whenever possible, a principal I have instilled into our Health Officers. Among a population comprising so many foreigners, it is to be expected that our men will meet with difficulty at times, but this is due more to ignorance of all sanitary precautions etc., than from a desire to be antagonistic on the part of the foreign-born householders, and it is fast dying out.

In conclusion I desire to extend to the Department's officials, my sincere thanks and appreciation of their kindness and many courtesies, and to assure them that I will do my utmost in this county to assist in the progress of the splendid work that is being done by the Department of Health.

Statistical Summary of Work Done During the Year.

Forms 37 received,	507		
Forms 43 to 49 received,	482		
Examined cases alleged to be			
Variola,	0	Dairy farms inspected for	
Diphtheria,	1	Typhoid fever,	2
Scarlet fever,	14	Diphtheria,	4
Varicella,	9	Scarlet fever,	5
Pertussis,	3		
Measles,	18		
Mumps,	5		

Stock transferred on 2 premises.

Sale of milk stopped on 7 premises.

Two schools ordered closed. Reason, scarlet fever.

Fourteen Health Officers instructed at office.

Five investigations made of epidemics in boroughs.

Two investigations made of drainage complaints.

Four stream and water supply pollutions taken up.

SOMERSET COUNTY.

Abstracts from Reports of Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

SMALLPOX.

Dr. C. P. Large, C. M. I. January 12th, pursuant to our conversation I visited a case of smallpox in Romania, which in company with another physician I unhesitatingly diagnosed, and immediately vaccinated the remaining five of the family, the patient, however, never had been vaccinated. I also vaccinated 19 other contacts, and no further cases developed.

SCARLET FEVER.

January 23rd, upon advice from the Health Officer I visited a family in Greenville, and found three of the children had scarlet fever, I excluded all members of the family from school and church.

Through information of the Health Officer of Lower Turkeyfoot Township, I inspected and found two well developed cases of scarlet fever, with three other children in the family attending school. I ordered the school closed and disinfection performed.

TYPHOID FEVER.

August 17th, upon compliance with the advice from the Department I made an inspection of two typhoid fever cases of Wellersburg, which had never been reported, as the Board of Health had been disbanded two years previous. I had the house placarded; and on September 13th, I made an inspection of five cases of typhoid fever

at Friedens, Somerset Township, and had samples of the water supply sent to the Laboratories at Philadelphia. No other cases have since developed.

DIPHTHERIA.

January 27th, I followed your directions and made an inspection of a premises in Confluence where I found the daughter ill with membranous croup, and the house not placarded. The patient died and about 100 of the school children inspected the corpse. Upon hearing of this unwise procedure I told the Health Officer to have the undertaker hold a private funeral. I also ordered the school closed and disinfected, the home was also disinfected before the funeral.

February 10th, upon suggestion of the Health Officer for Quemahoning Township I inspected the premises of some foreigners at Ralphton, which had been placarded for diphtheria. The family disregarded quarantine and allowed the neighboring children to come in and see the patient and then go to the public school. This was reported, and it was necessary to establish a day and night guard.

CHICKENPOX.

February 13th, I received advice that there were several cases of chickenpox in Greenville Township. I made an inspection and found five cases, and also learned that the school teacher was boarding in a house where chickenpox existed, which I immediately had her change. On January 17th, I also found four cases in Pocohontus, unattended by a physician.

MEASLES.

March 21st, upon receipt of notice from the Health Officer in Elk Lick Township, I investigated and found five cases in several families, all unattended by a physician.

SNYDER COUNTY.

Abstracts from Reports of Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

Dr. F. J. Wagenseller, C. M. I. With reference to the alleged epidemic of tonsilitis, in this county, I have made a careful investigation, and can find nothing but rumors, which lead me to believe it

was an advertising scheme of one of the new doctors around here. I talked the matter over with him, and he said he had forty cases of mild tonsilitis, which recovered in a few days, and at present he had but one, which was out in the country and therefore I was unable to see it. I think there is no foundation to the report; but I do find that there has been some whooping cough, which I am following up. The other physicians that I have inquired of, know nothing of the tonsilitis epidemic.

I visited the typhoid infected district in Monroe Township, and took samples of water from five different sources, where at least twelve or fifteen families harvested ice last winter.

Statistical Summary of Work Done During the Year.

Forms 34 received,	80	Forms 37 received,	72
Forms 36 received,	73		

SULLIVAN COUNTY.

Dr. J. L. Christian, C. M. I.

Statistical Summary of Work Done During the Year 1911.

Received during the year 68 reports of contagious diseases.

Typhoid fever,	12		
Scarlet fever,	21		
Measles,	17	Forms 34 received,	62
Whooping cough,	1	Forms 36 received,	57
Erysipelas,	2	Forms 37 received,	48
Chickenpox,	1		
Diphtheria,	14		

No inspection made during the year, and we had no requests for same.

SUSQUEHANNA COUNTY.

Abstracts from Reports of Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

SCARLET FEVER.

Dr. H. B. Lathrop, C. M. I. January 12th, two children in Rush Township were reported to the Department as ill with what was suspected to be scarlet fever, as the disease existed in the township, and I was instructed to investigate. No physician was in attendance. I visited these cases and found the report to be without foundation as the children had no appearance of the disease.

CHICKENPOX.

March 25th, two cases of chickenpox were reported in Harford Township, no physician. I investigated these by deputy and the diagnosis was confirmed.

DAIRY FARMS INSPECTED.

FOR TYPHOID FEVER.

May 4th, in Clifford Township, sale of milk stopped at the A. D. farm.

September 3rd, in Auburn Township, milk directed to be done by outside parties on the L. farm.

In November, at J. W. W. in New Milford Township milking directed to be done by outside parties.

FOR DIPHTHERIA.

October 25th, at B. E. L. farm in Brooklyn Township, milking directed to be done by outside parties.

FOR SCARLET FEVER.

May 4th, at R. C's. farm in Auburn Township, milking directed to be done by outside parties.

All of the above cases were investigated by a deputy. Scarlet fever appearing in Flynn school, Rush Township, I ordered the school closed November 20 until the room was disinfected, which was done.

Statistical Summary of Work Done During the Year.

Forms 37 received,	120	Examined cases alleged to be	
Forms 36 received,	136	Scarlet fever,	2
Forms 34 received,	135	Varicella,	2

One school ordered closed, reason, scarlet fever.
Two Health Officers were instructed at my office.

TIOGA COUNTY.

Abstracts from Reports of Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

DIPHTHERIA.

Dr. S. P. Hakes, C. M. I. September 23d, I investigated several families where diphtheria exists in Rutland Township. The first farm I examined had two families in the one house, both having symptoms, or rather, the one family having a well defined case of diphtheria where I was obliged to change the arrangements of handling the milk. I also found the disease on another farm close by, which was contracted from the case already referred to, and was obliged to change the arrangement of handling the milk. From there I went to another farm and found the daughter ill with the disease. This case came down in school, so I asked the School Board to close the school, which they agreed to do, and I also asked the clergyman to discontinue church gatherings for the present. October 31st, the Health

Officer of Jackson Township phoned me of a case of diphtheria that had just moved to Elmira, N. Y., and was so diagnosed after arriving there. The house that he left in Jackson Township has been disinfected as per your advice.

November 25th, I inspected a case of diphtheria in a child in Westfield Township, where I ordered the milk products handled at some other place, and a general clean up, disinfecting the premises with "unslacked lime."

TYPHOID FEVER.

January 17th, inspected a case of typhoid fever in Middlebury Township on a farm from which milk is being sold extensively. The source of the contagion is unknown except that the owner had a brother living five miles away, who died of the disease three months previous. All precautions were being taken except with regard to handling the milk, which I rearranged, and also recommended the substitution of formaldehyde instead of "copperas" for disinfecting purposes.

April 17th, inspected a dairy farm in Farmingtown Township where the farmer had typhoid fever, and where infection could not be traced except that he cared for a niece who had the disease in the fall or early winter.

October 1st, inspected a dairy farm in Charleston Township where the son is ill with typhoid fever, and from which place butter is sold. He is a salesman and had boarded at a place where they had typhoid fever, and no doubt this was the source of infection. I instructed that the sale of butter be discontinued, and that the surroundings be put in a more sanitary condition. Inspected another case of typhoid in Morris Township on a farm from which milk is sold. Source of the infection unknown. Everything in a good sanitary condition, but I was obliged to change the arrangement of handling the milk products. September 11th, inspected a dairy farm in Delmar Township where the wife had typhoid fever, source of infection unknown except that the daughter had been ill with the disease in the same house some six years ago. I recommended a more sanitary condition of the outhouse and also was obliged to change the arrangement of handling the milk. September 17th, investigated a farm in Farmington Township where the son was ill with typhoid fever. He had been working with his brother in Tioga Township whose family was ill with the fever. I issued the Department's rulings with regard to handling of the milk and also in regard to isolating the patient.

SCARLET FEVER.

January 14th, have been in Sullivan Township examining cases of alleged scarlet fever, found two cases in one family and two in

another family, but all having only suspicious symptoms. The one boy having attended school in the communicable stage of the disease, I requested that the school be closed for 14 days and then disinfected. January 31st, was informed that a man in Westfield Township had ignored the quarantine for scarlet fever.

April 28th, inspected a farm in Sullivan Township where the daughter is ill with scarlet fever, and milk being sold from the premises. The parents seemed very anxious to follow out all instructions to prevent the spread of the disease.

May 8th, inspected a dairy farm in Brookfield Township where I found a case which no doubt had been contracted just across the line in New York State where they had the disease. The rules of the Department are being strictly observed and everything is in a sanitary condition. Also on November 10th, inspected a case in Farmington Township which no doubt was contracted at school where a pupil had visited who was ill with scarlet fever. I advised that the insanitary conditions around the place be corrected, also that the milk products be handled by an outsider who would not come in contact with the patient. Another case in the same township was discovered through a complaint made to me, no physician being in attendance, as they had been trying to conceal the case. Out of the four children in the family, but one, the daughter 14 years old, had the disease, she being the only one who had attended the school already referred to. It was a suspicious case, but I could not make any positive diagnosis that could be tested in court, the case being past the eruptive stage when discovered.

November 17th, inspected a case of scarlet fever in Chatham Township where the daughter is down with the disease having taught school in the Farmington Township school above referred to, where several pupils were sent home with the fever. I compelled them to have the son take charge of the milk products, he living in another house on the farm; also recommended that the drain be put in a more sanitary condition. December 10th, was called by phone to Charleston Township where there was some dissatisfaction as to the diagnosis of a case of scarlet fever on a dairy farm from which milk was being sold. I made arrangement with the attending physician and we drove 17 or 18 miles to the place and found the eruption had practically disappeared, and quite a characteristic tongue, from which we confirmed the diagnosis, as it was evidently a mild case of scarlatina. By going over the matter thoroughly with the family I was able to convince them that the diagnosis was just. It was the only case in the section and I am unable to trace the source.

WHOOPIING COUGH.

May 31st, investigated whooping cough in a family in Delmar Township where I found one case in the active stage, and another

child past the active stage of the disease. I then visited another family and examined five children, but could make no positive diagnosis. The mother claimed three children had previously had the disease, but I failed to diagnose the disease in the remaining two that were then at home.

October 24, visited an outbreak of whooping cough in the schools of Farmington Township. Out of ten pupils I diagnosed five true cases of pertussis, the other five had had whooping cough. We had the directors close the school until the building was disinfected, and visited the parents where pertussis was discovered and had the houses placarded. The same conditions exist in the adjoining township, where we will turn our attention tomorrow.

MEASLES.

May 4th, in compliance with your instructions I have been to Shippen Township and examined cases alleged to be measles. I found two cases in one family, and in another family I found another case followed by pneumonia. In nine other families I found twenty cases that had measles but it was past the 21 days since onset of the disease, and hence we did not placard. They did not want to be quarantined yet I was satisfied they all had measles, but I had no present positive evidence. It was the common talk among the town people that children had been to school with the measles, but the school is now closed until fall.

CHICKENPOX.

November 22, complaint was made that chickenpox was in a family in Tioga Township, so I went there and confirmed the diagnosis in one child out of a family of six children. I instructed the Health Officer to visit the homes of the school children and see if there were any more cases, which he did, but they refused to sign the card or acknowledge they had the disease. So I visited six families myself and found 14 cases in all, so I ordered the school closed until disinfected.

December 22nd, through information received from the physician of Wellsboro that there was a suspicious case of smallpox at Mash Creek, I took the train and met the doctor at the house where there was a family of six children. The mother and all of the children had for the past two months a skin lesion. The patient for the present was a boy who had skin lesions and a temperature, which almost lead a person to believe he had two diseases at once, namely, Varicella, or Variola and Impetigo Contagiosa. The patient had never been vaccinated, the mother and the other children had fair vaccination cicatrices. They said the mother had chickenpox some five years ago. The following day on examining every one to make

sure of the diagnosis, we found the eruption resembled more and more Impetigo in both mother and son. I had the physician watch the patients closely for a few days to further confirm the diagnosis.

Statistical Summary of Work Performed During the Year.

Forms 34 received,	174		
Forms 37 received,	127		
Forms 36 received,	124		
Examined cases alleged to be		Dairies inspected for	
Diphtheria,	6	Typhoid fever,	12
Scarlet fever,	7	Diphtheria,	1
Varicella,	2	Scarlet fever,	4
Measles,	36		
Pertussis,	25		

Stock transferred on 5 premises.
Sale of milk stopped on 5 premises.

UNION COUNTY.

Abstracts from Reports of Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

Dr. C. H. Dimm, C. M. I. January 3rd, at the request of the Health Officer I inspected a case of what was supposed to be small-pox in White Deer Township, but upon investigation it proved to be a case of urticaria. No further action.

February 27th, there was an outbreak of typhoid fever in a family in West Buffalo Township all of the five children being ill with the disease, and a sample of the well water was sent to the Laboratories in Philadelphia for examination, and all precautions taken to prevent spread of the disease.

February 22nd, went to Glen Iron to investigate a family of scarlet fever where ten children were all infected with the disease. I found the patients all advanced in convalescence and running through the different rooms, which I discontinued; also ordered all other necessary precautions to prevent the spread of the disease.

Upon advice from the Health Officer on May 7th, that measles existed in Kelly Township I investigated the premises and diagnosed one case of measles, which had been reported.

Forms 34 received,	28	Forms 37 received,	22
Forms 36 received,	23		

VENANGO COUNTY.

Abstracts from Reports of Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

WHOOPIING COUGH.

Dr. J. P. Strayer, C. M. I. For the past six weeks whooping cough has been very prevalent in the schools. The people will not play square, and no doubt many cases are escaping our notice. We

don't want to quarantine cases unless we can get good histories or actually find them whooping. It takes a good deal of time, and I have deputized a physician who lives in that district to make the diagnosis. He is on the School Board and thoroughly interested in health work. I feel sure he will keep tabs in any of these diseases that he might hear about.

MUMPS

There are many cases of mumps in several of the schools, and it is very up hill work for us, as the people are very sly and don't want to obey quarantine. They think their children should all have the disease when they are small, and they think it is foolish to fumigate. About the only way to make the work effective is to make an example of a few, and it seems pretty hard lines to do that.

TYPHOID FEVER.

There has been very little typhoid fever in this vicinity this year. One case occurred on a farm run by a Polish family, with very poor ideas of sanitation. I tried to get them to send the boy to the hospital, but this they refused to do; so I was obliged to stop the sale of milk, and take no chances of spreading the disease. I feel sure the disease was not contracted at his home, but I was informed that the boy had been herding cattle all summer through the woods, and of course drank water from surface streams.

SCARLET FEVER.

I had some inkling of scarlet fever in the little hamlet of Reno, so I took it upon myself to make an investigation. In this small village I found seven families having the disease. I laid down stringent rules, telling them if they were not followed out, arrests would follow. I think this is the only course to take to prevent spread of the disease.

Upon your instructions I went to Sugar Creek Township, and visited a good many families who have not been keeping the quarantine properly. I gave them good warning, and if there is any further trouble that community cannot lay the matter up to ignorance of the law.

During the early part of spring there was quite an epidemic of measles in my district. which meant a good deal to abate, but which we finally succeeded in doing.

We are gradually training the people that these communicable diseases are unnecessary. As I go on with the work I find more and more people who are trying to help prevent the spread. I find, generally, school directors and some of the teachers hard to control

at the beginning of an epidemic, still not seeming to understand that in not preventing an epidemic from getting a start that it means a closed school and an expensive school house fumigation.

Statistical Summary of Work Performed During the Year.

Forms 34 received,	528		
Forms 36 received,	455		
Forms 37 received,	486		
Cases examined alleged to be		Dairy farms inspected for	
Typhoid fever,	1	Scarlet fever,	1
Varicella,	18		
Measles,	16		

WARREN COUNTY.

Abstracts from Reports of Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

TYPHOID FEVER.

Dr. M. V. Ball, C. M. I., Dr. C. W. Schmuehl, Successor, Commission November 1, 1911.

May 2nd, the Health Officer reported typhoid fever on a dairy farm in Columbus Township. I inspected the premises and ordered the milking to be done outside the house. Patient contracted disease in a neighboring city and no other cases were reported in the neighborhood. May 11th, visited a house at Russell where typhoid was reported. Found outhouse near the well and very filthy. Patient had been removed to hospital, but the excreta of several days had not been taken care of. Owner of premises lived a distance away and I deemed it necessary to have nuisance abated without further delay. July 31st, inspected a dairy farm in Conemaugh Township where typhoid was reported. Sanitary conditions were excellent, but milking utensils were washed in the house. I ordered the milking and utensils to be cared for outside of premises.

August 13th, it was reported that because of a nuisance from a creamery in Sugar Grove Borough there was danger of an epidemic. I visited the location and found that because of the dry season there was considerable stench from the refuse of the creamery. I investigated the rumor of several cases of typhoid but found only two and these were contracted elsewhere and had no connection with the nuisance. The creamery owners at my suggestion, dredged the stream into which the refuse was emptied and arranged to have a cesspool built to take care of the waste in dry weather. September 21, two cases of typhoid were reported in Deerfield Township contracted while visiting in Warren Borough. The matter was investigated; samples of well water found to contain colon bacilli. In conjunction with the borough officials the well was condemned and a number of others in the neighborhood examined. As this disease

was present to a limited extent in other sections and there had been considerable rain-fall, the public was advised to boil all water for drinking purposes.

December 7th, visited a dairy farm at Russell, to which place a patient, then ill with typhoid fever, was reported to have recently returned from Niles, Ohio, having contracted the disease at the latter place. The milking, the care of utensils and distribution of dairy products were done by a neighbor in accordance with the rules of the Department. There were no other cases reported from this locality.

DIPHTHERIA.

October 25th, inspected dairy farm in Pine Grove Township where diphtheria was reported. Milking ordered done outside of premises. December 21st, I was notified by the health authorities of Erie, Pa., that a domestic with the symptoms of diphtheria had evaded the health authorities at that place before quarantine could be placed on the premises and had returned to her home in Columbus Township. I immediately notified the Health Officer covering this territory to endeavor to locate the patient which he did promptly. The following day I visited the dairy farm to which she had gone and placed absolute quarantine over the entire household. I permitted the family to use the products of their small dairy which was approved by the Department. The symptoms were so mild and without a sign of membranous formation as to cast doubt on the diagnosis so that on my return I telephoned the Erie Health authorities relative to the case and was informed that a positive cultural test had been obtained. No other cases were reported from this section of the country.

SCARLET FEVER.

Early in January, a public funeral in the village of Russell of a person dead from scarlet fever, was prevented by sending the Health Officer to the place. February 21st, five houses placarded in Conewango Township for scarlet fever. Some of these cases were at first thought to be diphtheria, as the throat symptoms were the more important. August 20th, visited a dairy farm in Elk Township where a mild case of scarlet fever had been reported. Gave usual instructions. October 11th, inspected dairy farm in Farmington Township where scarlet fever had been reported. Ordered milking to be done outside of premises.

VARICELLA (CHICKENPOX).

On information, furnished by the Health Officer, of a suspected outbreak of chickenpox in the village of Saybrook, Sheffield Township I visited the above place on December 7th, and located three patients with the symptoms of this disease then in attendance at the village

school, and also three other patients in as many families nearby. All were placed in quarantine without the development of other cases as far as known. With the exception of one well developed case, all were of a very mild type.

MEASLES.

January 1st, an epidemic of measles occurred in Sheffield Township affecting nearly every child in the village. Fifty houses were placarded during the month.

SMALLPOX.

February 27th, at the request of the attending physician, examined a skin eruption on an adult employed in cleaning street cars. The eruption was postular and resembled smallpox. The patient was isolated and those coming in contact vaccinated. No other cases developed and the further course of the disease proved it to be a possible syphilide.

MISCELLANEOUS INSPECTIONS.

January 6th, Street Car Company was notified to keep their street cars in a more cleanly condition and they promised to do so.

September 7th, my attention was called to the construction of a concrete dam in Warren Borough which was likely to cause a nuisance and I was requested to write the Commissioners of Health asking them that the same be prevented. The construction was temporarily discontinued until a hearing could be had which occurred later in the year.

Statistical Summary of Work Done During the Year.

Forms 37 received,	213	Dairies inspected for	
Forms 43 to 49 received,	187	Typhoid fever,	4
		Diphtheria,	2
Cases examined alleged to be		Scarlet fever,	2
Measles,	97	Scarlet fever,	20
Typhoid fever,	26	Diphtheria,	9
Chickenpox,	10	Mumps,	17
Months from January to November to M. V. B.			
Cases examined alleged to be		Scarlet fever,	3
Typhoid fever,	1	Diphtheria,	5
Chickenpox,	7	Mumps,	15

For months of November and December by C. W. Schmuehl.

WASHINGTON COUNTY.

Abstracts from Reports of Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

SCARLET FEVER.

Dr. C. B. Wood, C. M. I. Jan. 24th, received a communication from Health Officer J. H. C. stating that a case of scarlet fever existed in a family in Union Township, no doctor in attendance, and the other children attending school. I visited the house and made an investigation, but found no evidence that would corroborate the Health Officer's report. Instructed teacher of school to keep sharp watch for sick pupils. September 13th, I was informed by school officials that an epidemic of scarlet fever existed at Beallsville. I visited the town and learned from the doctors that they were attending nine cases. Citizens on local Board of Health had refused to serve. Others have been appointed with same results. No quarantine attempted. October 11th, I went there again and found that ten additional cases had developed, one death. Schools were properly closed for several weeks and disinfection performed. The work of preventing sickness in Beallsville is not popular, citizens seem to be afraid of offending one another.

TYPHOID FEVER.

President of Pittsburgh-Buffalo Coal Company called me by phone asking me to accompany him to Marianna on account of an outbreak of typhoid fever. On reaching there we discovered a serious state of affairs, some thirty or forty cases. A large sewer, extending from the town and discharging into Ten Mile creek has been broken by a landslide, causing the discharge of sewer into Ten Mile Creek above the dam, the source of supply for town's hydrant water. In spite of the fact that the town was well supplied with drilled wells a number of inhabitants had been accustomed to drink the hydrant water, rather than to go to the wells. The epidemic spread very rapidly. I found the President very anxious to do everything possible to check the contagion and to care for those already infected. Two trained nurses were secured to act as district nurses, and the first thing needed was to stop the drinking of the hydrant water. So the two nurses went the rounds, visiting each house at least once a day, telling the people not to drink the hydrant water, and to boil all water before drinking or cooking it. Of course I at once notified the Department of the epidemic and expert assistance promptly came to our aid. Dr. Hunt, on his arrival, with his engineers and assistants, took charge. The water shed of Ten Mile creek was investigated and all possible sources of the original cause of the infection were sought. The town's water supply was treated, night and day.

In all, there were seventy-three cases of fever developed, with only three deaths. Considering the low mortality, the work done by the Department, and the local physicians, is to be highly commended. From its very inception, the aim of the Pittsburgh-Buffalo Company has been to make Marianna a model mining town. Situated on a hill, with gentle slopes, every house on its ample lot, flower and vegetable garden space, all houses with bath room and hydrant water, sewer system, concrete side-walks and shade trees. Near the mine, is a three story brick bath house. The miners here change clothing for work, and on coming out of the mine, take a shower bath, hot and cold water, put on their dry clothing and go home clean and in good shape. Separate accommodation for boys.

Thirty-five drilled wells, concrete surface protection, located in the town. A sanitary league organized in the schools, and lectures are regularly given before the schools along sanitary lines by the appointed sanitary inspector of the Pittsburgh-Buffalo Company. The children are instructed on the benefits of fresh air and cleanliness, and on, how to avoid sickness, the dangers of flies and rats as contagion carriers. This work has developed a pride among the children and clean streets and yards are the results. A filtration plant has been installed, and it is the intention of the Company to erect a disposal plant in the near future. A daily collection of garbage is made. Printed sanitary circulars, neatly framed, are posted over the town in conspicuous places, and each house, over three hundred in number, is kept supplied with one of the sanitary circulars on, "what you can do to help make Marianna a clean city." Since the typhoid fever epidemic of March-April 1911, but very few cases of contagious diseases have developed in Marianna, and without a doubt the town has no parallel among the mining towns of western Pennsylvania, in the matter of sanitation, cleanliness and good health.

CHOLERA CONTACT.

On receipt of destination slips March 18th, I attempted to locate cholera contacts, who had come into Union Township. Did not succeed. This is difficult work, for the moment you make inquiry among the foreigners, suspicion is aroused and they think you want these people on criminal charge.

SMALLPOX CONTACTS.

April 22, attempt to locate a smallpox contact who had come to Monongahela after exposure on ship. I could not find him. May 3, and 7th, smallpox contacts had given destination as Courtney, Union township. The friends said that "the people had gone away," and did not know where they would get work.

TYPHOID FEVER IN MORRIS TOWNSHIP.

July 28, on information received from a physician in Sparta that an outbreak of typhoid fever had developed in his territory, I made a trip there to investigate. I found four cases of typhoid fever in the house of a farmer, one death occurred. An intelligent trained nurse in attendance, was observing all the regulations to prevent further infection. Source of this outbreak could not be located. August 20, on receipt of notice from a physician that typhoid fever had developed in a family in Nottingham township I made a trip of inspection to that house. Found the place in pretty fair condition, but I ordered that no milk be shipped. This, he thought pretty hard, so he arranged to take his cattle to a neighbor's place, and his own people to have nothing to do with the handling or sale of the milk. This we permitted, no other cases developed.

On information received from the Health Officer that typhoid fever prevailed in a home from which milk was being shipped to Pittsburgh, I found that he had leased the farm and hired a man to run the dairy. The hired man was the fever victim. Of all the filthy, stinking, rotten holes, I have visited, this alleged dairy would come under the wire, and nine miles ahead of the most insanitary. An old wreck of a milk house, directly below a closet without a vault. The cattle barn almost covered up with the accumulation of cow-manure, and it is safe to say that there were a thousand loads of manure in the barn yard. I ordered no more milk sold, and got his Pittsburgh milk dealer's address, suggesting that the Department of Health inform the Pittsburgh Health Department of this dairy's condition. The Health Officer has kept him under observation, in order to see that our orders were observed.

DIPHTHERIA IN EAST PIKE RUN TOWNSHIP.

September 9th, reports received from Health Officer showing diphtheria in Daisytown and Red Hill, mining towns in East Pike Run township. In company with the Health Officer I visited these points and found three cases of diphtheria at Daisytown and seven cases at Red Hill. There had been 3 deaths at Red Hill. Quarantine poorly observed at each place. Miners home invariably overcrowded, making it almost impossible for the wage earner to enter the house without coming in contact with the sick. Daisytown is located on Creek bottom, East Pike Run, and is surrounded by high hills. Damp, muddy, and little or no provision for surface drainage, although the coal company, had constructed concrete water-tables, discharging on street at every street corner, hence, accumulation of filth. I interviewed the officials of the company, and they promised a general cleaning up, also to have the company policeman aid in enforcing quarantine. October 17, I was again requested by the

Department of Health to visit Daisytown and Red Hill Districts. I found the disease had abated at Red Hill, the epidemic had spread farther up Pike Run and six cases had developed among the children of White Hall school.

I met several of the school directors and teachers, I ordered the schools closed, the rooms to be thoroughly disinfected, with instructions that all the books be in the room at the time of disinfection. The epidemic continued until late in the fall. straggling cases here and there, population mostly foreigners, crowded houses and general insanitary conditions.

October 7, on information received from the Health Officer I visited Mt. Pleasant township and found a case of typhoid fever in the house of a dairyman, and conditions very bad. Hog yard on both sides of spring house, spring house subjected to floods. No vault for out-side closet. Entire place unkempt and insanitary. Stopped sale of dairy products, and ordered a general clean-up, including removal of hogs from vicinity of milk house. On information received from the Health Officer that typhoid fever existed in Nottingham township I visited the place, found conditions good, and dejecta properly treated. I ordered them to discontinue the sale of butter to stores of surrounding villages.

TYPHOID FEVER AND DIPHTHERIA AT BESCO.

October 18, my attention was called to an outbreak of diphtheria at Besco, a mining village on Ten Mile creek, two miles from the Monongahela River, in East Bethlehem township. The Health Officer had done all possible to enforce quarantine, but as the population is foreigners it was difficult to have requirements observed. Sanitary conditions bad. The Coal Company had constructed a reservoir at one end of the village, and this was the receptacle for the greater part of the surface drainage of the village. Three cases of diphtheria existed, and under the careful management of the Health Officer there was no further spread of the disease. I interviewed the company officials, and called attention to contamination of the reservoir by the surface drainage. Also suggested a letter in my report, to company owners from Department of Health. The same physician in attendance was also attending three mild cases of typhoid fever in the village.

In company with the Health Officer I also visited Vesta, a new mining village owned by the Dilworth Coal Co. This village is admirably situated on high hill and is supplied with water from a spring on a still higher hill. Water conducted to concrete spring houses, a dozen or so in number, located at convenient points, throughout village. Twelve cases of diphtheria had existed, one death. At the time of my visit, the disease had abated, and because

of the incompleteness of a new tipple, the village was almost depopulated. As this coal company has observed sanitary matters, the place should be a model town.

CHICKENPOX—CARROLL TOWNSHIP.

November 7th, Mrs. Abbott, a teacher in Bellwood school, Carroll township wrote that a number of her school children were out of school with chickenpox, no physician. I visited a number of these reported cases, established diagnosis and notified the Health Officer and the houses were quarantined. Received a letter from Principal Linn, same school district, as to additional cases of chickenpox in Bellwood district. I visited the homes and reported to the Health Officer. Received a letter from Constable of West Bethlehem township reporting a nuisance, complained of at West Collarsville. I visited the village and found the trouble among the foreigners. The owner of a stable was depositing his stable manure just above the well of the resident in and below adjoining lot. I expounded the law to the offender, and the menace was removed.

Statistical Summary of Work Done During the Year.

Forms 37 received,	665	
Forms 36 received,	720	
Forms 34 received,	991	
Examined cases alleged to be		Dairies inspected for
Typhoid fever,	3	Typhoid fever, 3
Diphtheria,	20	
Scarlet fever,	13	
Varicella,	17	
Six nuisances and menaces abated.		
Two borough investigations.		
Three schools closed—reason, diphtheria.		
Stock transferred—one.		
Sale of butter stopped at 1 farm.		
Sale of milk stopped at 3 farms.		

WAYNE COUNTY.

Abstracts From Reports of Investigations of Alleged Communicable Diseases During the Year 1911.

TYPHOID FEVER.

Dr. H. B. Ely, C. M. I. July 30, inspected a dairy farm in South Canaan Township where I was obliged to change the arrangements of handling the milk, on account of typhoid fever. October 28th, was obliged to stop the sale of milk at a dairy farm in South Canaan Township on account of typhoid fever.

December 2nd, not being able to make satisfactory arrangements so that the milk could be handled free from infection, ordered the sale of milk stopped at a farm in Clinton Township on account of typhoid.

SCARLET FEVER.

January 14, and March 20, respectively, made two inspections in Mt. Pleasant Township for scarlet fever, and was obliged to make different arrangements for handling the milk at each dairy farm. August 21, made an inspection at a farm in Salem Township for scarlet fever, and arranged for a neighbor to handle the milk and look after the cattle in order to continue the sale of milk. October 13 inspected a premises in Lake Township, where I ordered the sale of milk stopped on account of scarlet fever. With reference to the outbreak of scarlet fever at Equinunk, everything seemed to be going along all right, until I received a letter from Dr. F. whose wife is also a regular physician. Their son, it seems took sick with the disease, and he quarantined them in a room together; but before the time was up, the wife (unbeknown to the Doctor) took the son about seven miles into the country. As soon as the Doctor found it out he brought them both back and placed them again in quarantine. Feeling that it was a family row, I deemed it best to go there and quiet the matter as quickly as possible. The Doctor seemed inclined to have his wife arrested for breaking quarantine, but as her time was up, and the boy entirely well, I had the Health Officer fumigate at once, and release them.

DIPHTHERIA.

July 14, made an inspection of a dairy farm in Manchester Township for diphtheria, where the patient was a visitor at the farm. The milk had been sold to a Creamery, and I allowed it to continue, providing it was arranged to be handled from a neighbor.

STATISTICAL SUMMARY.

Cards 34 received,	301	Cards 37 received,	165
Cards 36 received,	157		

Two cases of scarlet fever examined.

Four dairy farms inspected for typhoid fever.

One dairy farm inspected for diphtheria.

Four dairy farms inspected for scarlet fever.

Sale of milk stopped on one premises.

WESTMORELAND COUNTY.

Abstracts From Reports of Investigations of Alleged Communicable Diseases During the Year 1911.

CHOLERA.

Dr. I. M. Portser, C. M. I. Medical observation of thirty cholera contacts that came through the ports of Philadelphia and New York from cholera infected districts was completed. Of the above only one developed suspicious symptoms, contact was located at Jamison No. 1 works, Hempfield Township. Personally I visited this case every other day and found it to be sporadic.

MEASLES.

Feb. 18, on report by phone from the Health Officer of Sewickley Township that measles prevailed in Sulphur Springs I made an investigation and confirmed the diagnosis in 14 cases from the school. I ordered the school closed and fumigated. February 28, an epidemic of measles was reported to exist at Wireton and Gibsonton, Rostraver Township, by the Health Officer of this township. Diagnosis was confirmed in 14 households, children of these households attended the schools, so I ordered both schools closed and fumigated.

March 3, reported an epidemic of measles in Shaner's School, Sewickley Township by the Health Officer. Diagnosis in eight cases confirmed; school was ordered closed and fumigated. March 29, diagnosed eight cases of measles in the Guffy School, Sewickley Township, and also in the Dick School, same township. Ten households in the latter district were under quarantine, and the children in both districts were attending school, so schools of both districts were ordered closed. The school houses were placarded by the Health Officer of Sewickley Township on account of difference of opinion between the school board and the inspector.

SCARLET FEVER.

On a petition sent to the Department by several citizens of Claridge, Penn Township, stating that they had nine cases of scarlet fever in their district, I made an investigation on the above date. Claridge is a town of about 800 inhabitants, mostly of foreign element. It has many small stores and shops. Place generally insani-tary. Investigation showed the source of the epidemic to be in Export, Franklin Township, where scarlatina had been epidemic immediately before. A miner's strike had been on at Claridge, clothing and supplies were sent from Export to the striking miners at Claridge and in this way the disease was carried. Twenty-two cases were reported in all. The greatest difficulty was in the apprehension of the milder cases who were unattended by a physician. In most instances no physician was called, in order for the householder, to avoid quarantine. In making a canvass of the district five cases were diagnosed from secondary lesions, and a deputy physician, a resident, appointed to examine suspicious cases. The public school was closed and fumigated. Four guards were placed, two night and two day. An absolute quarantine maintained for six weeks, when the epidemic abated.

On report of the Health Officer of East Huntingdon Township that a contagious disease existed, thought to be scarlatina, the same as existed in other households in this district. April 3, investigated this case and found a child aged 12 with secondary lesions of scarlatina. Householder made considerable trouble in regard to the

quarantine, stated he did not have work and no money to support his family. As the case had not been isolated, ordered absolute quarantine and gave him aid.

May 13, on report of the Health Officer of Rostraver Township, investigated non-reported scarlatina and made diagnosis from secondary lesions. As the case had not been isolated, insisted on absolute quarantine. Had no more cases in this district. August 2, investigated sale of milk from a dairy farm in Rostraver Township, made an arrangement whereby the person handling the milk business should keep absolutely out of typhoid infected house. Milk house separate from house and conditions generally good. Allowed to continue in the production of milk under improved conditions.

August 5, investigated sale of milk at a farm in Hempfield Township where diphtheria existed. Conditions not very satisfactory in a sanitary way. Mr. S. was to stay out of the infected house and was allowed to continue selling milk under conditions that the well water was not to be used in the cleansing of utensils until the well and drain were placed in a sanitary condition. August 12, investigated sale of milk at a farm in Rostraver Township. milk in a small quantity from two cows sold. Diphtheria was present in this household, and I left the place with the understanding that the householder would stop selling milk or keep out of the infected house. Investigated a reported case of scarlatina in Unity Township by Department order. A child aged 8 years was taken ill, the regular physician absent, called Dr. S. instead; the child had a very slight rash lasting four hours. The case was regularly placarded by the Health Officer and quarantine instituted. The next morning the regular family physician was called, on investigation found no sore throat, rash or any indications of scarlatina. I saw the case one week from the onset and could find no secondary lesions. Placard was ordered removed.

August 5, made an investigation in Hempfield Township on request of the physician in charge of diphtheria cases on these premises to determine the cause of the disease. This family had three cases of diphtheria, only one case at a time in six weeks periods, and was under quarantine for the 21 day period in each instance, quarantine after fumigation. On looking over the premises, found a filthy drain leading from a well used for water supply and draining into a filthy and unsightly hole. The well did not prevent surface water from flowing into it and water from the leaky drain would have easy access. Householder and landlord were at a difference as to who should place the premises in a sanitary condition. Notice was served on the landlord by the Health Officer and well and drain repaired. An immunizing dose of State antitoxin was ordered for

the well members of the family. After fumigating and release of quarantine had no further trouble.

Sale of milk was prohibited at a farm in Mt. Pleasant Township where typhoid fever existed, milk produced from 5 cows and sold locally. Householder would not meet the Department's requirements with the above result.

September 23, inspected a farm where milk was sold in small quantities and diphtheria existed. Arranged transfer of stock.

August 2, report from the Health Officer in Rostraver Township that typhoid fever developed in five families at Webster, there being ten cases in all. On investigation found that five cases existed in one family, that the father had died of this disease a few days before, and four other members convalescent. That in the original case, little or no care had been taken in disinfecting stools, that they had been dumped into a privy with practically no vault and it was overflowing. The ground upon which the house was built was very narrow and at the foot of a steep hill or really a bluff. The water used in washing was thrown into a drain that passed the well within two feet. The well which was used for furnishing water for domestic purposes was of the bucket fashion and in reality was the ending place of the surface drain. Cellar had three inches of mud and water in it with no outlet. Placed quarantine on the well and it was sealed shut. Ordered the landlord through the Health Officer to construct a proper privy vault, drain, and clean the cellar, construct a proper drain for surface water, disinfect the well according to Department instructions. Well not to be used until an examination revealed no contamination of the water. The landlord was slow in clearing these premises but finally accomplished it under force of a notice. Had no further typhoid in this district. Ten days later I re-inspected the place and found he had placed it in a sanitary condition.

October 15, on report of the Health Officer of Derry Township that unreported diphtheria existed at Bairdstown, visited this place August 16, and found that two children had been ill since August 13, one had died August 15, and the other was very ill with what the attending physician had diagnosed as croupous laryngitis. In conversation with attending physicians, they stated the disease was not contagious. Later a child in this family developed a pure tonsillar diphtheria and was treated by another physician with antitoxin, with prompt recovery. Diphtheria was epidemic in this vicinity at this time in a neighboring borough. Much difficulty was experienced by the local Board of Health in stamping out the disease on account of methods of physicians. In the one family it was pure evasion and the matter was taken up by the Department and legal action taken against the parties non-reporting.

November 3, on report that diphtheria existed on a dairy farm in Hempfield Township, made an inspection on November 11. Mr. S. maintained a dairy and sold his milk retail in Greensburg. Dairy farm had two dwellings upon it. The family where the case existed occupied one, and the persons engaged in the milk production the other. Milk house some 100 feet from infected house. Saw no reason why the milk business should not be continued without alteration.

November 20, received notice of a contagious disease existing in a family of Mt. Pleasant Township and that the children attended Fairview school. November 23d, made a diagnosis of impetigo contagiosa and two of the daughters were excluded from school until re-admitted by a physician's certificate pronouncing them cured.

On report from the Health Officer from Sewickley Township that a contagious disease existed in Gratztown school, made an investigation December 1, and found ten children with scabies. These children were excluded from school and the school house disinfected. Under medical attention the disease was soon abated from this district.

Statistical Summary of Work Done During the Year.

Forms 34 received,	1244		
Forms 36 received,	1000		
Forms 37 received,	857		
Cases examined alleged to be		Dairies inspected for	
Diphtheria,	5	Typhoid fever,	2
Scarlet fever,	10	Diphtheria,	4
Varicella,	24		
Measles,	114		

Stock transferred from two premises.

WYOMING COUNTY.

Abstracts from Reports of Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

MUMPS.

Dr. H. L. McKown, C. M. I. After receiving letter from Department dated February 11, stating that the Health Officer of Falls Township had asked aid in regard to a diagnosis of mumps so quarantine could be established, I went there and called on about 20 families, confirmed the diagnosis and established quarantine. I think that not a single family up to that time had employed a physician on account of the quarantine keeping the children out of school. We closed the schools and churches and ordered them fumigated. Subsequent evidence proved that the evidence was suppressed.

SCARLET FEVER.

March 13, received instructions from the Department to see an alleged case of scarlet fever with a physician from Noxen, he having reported the case as such, but after a few days decided the rash was due to Belladonna. We confirmed the diagnosis and released from quarantine. August 5, received instructions from the Department to visit Centermorel and investigate an alleged outbreak of scarlet fever, where upon investigation I found the disease in two families residing close together. They are properly quarantined and are observing the quarantine. They are being properly treated by Dr. B., and as they are some two miles from town in a community by themselves, I do not believe the disease will spread. A neighbor had the disease about a year previous.

WHOOPIING COUGH.

April 20, received instructions from the Department to investigate conditions at Vernon, Northumberland Township, where whooping cough is alleged to be epidemic, and no physician in attendance. I visited that section of the county with the Health Officer and found several families with the disease. I ordered the schools closed, and had the Health Officer placard and establish quarantine.

NUISANCE.

After receiving instructions from Department to visit the farm of A. DeW., near Falls, in regard to an alleged nuisance on the premises, I visited said farm October 25th. This place is far from being in a sanitary condition. Duck pond evidently drains into the creek. Barnyard full of manure. Chickenhouse small and dirty. However, this place will compare favorably with other farms in the vicinity. He raises produce, which he markets, in Scranton, and while there he purchases manure to fertilize his apple trees. This manure comes to Falls in cars and is always unloaded from the cars directly on the ground at the siding, in order to store temporarily so he will avoid demurrage, instead of immediately hauling from the cars to his property. This certainly creates a nuisance at Falls in the vicinity of this particular siding. I personally inspected this part and traveled to Falls to look after same. I find this is, as has been represented, and also he has stored manure near school house which is contrary to Department rules and instructions. He has been so notified and doubtless will do away with the nuisance. This particular family had scarlet fever 3 years ago, three cases and one death. Since this inspection, I have had occasion to go by the DeW. farm and I find that sanitary conditions are greatly improved.

Statistical Summary of Work Done During the Year.

Forms 36 received,	143		
Forms 37 received,	209		
Forms 34 received,	140		
Examined cases alleged to be		Dairies inspected for	
Scarlet fever,	5	Scarlet fever,	2
Mumps,	20		
Pertussis,	5		

Sale of milk stopped from two premises.

Three schools ordered closed. Reason—whooping cough and mumps.

Eight Health Officers instructed at office. Nine elsewhere.

One nuisance investigated.

YORK COUNTY.

Abstracts from Reports of Investigations of Alleged Cases of Communicable Diseases During the Year 1911.

TYPHOID FEVER.

Dr. J. S. Miller, C. M. I. July 1, on receipt of a letter from the Department stating that there was an alleged outbreak of typhoid fever in neighborhood of Winterstown Boro, N. Hopewell Township, and that a number of persons were afflicted with disease, and further urging that an investigation be made. I further received authority to visit Winterstown Borough and investigate conditions as reported in letter by a resident in N. Hopewell Township.

July 2, I visited an estate and found 3 tenement houses located thereon, all of which were located about 100 yards from a barn, about which there was stable manure and corn fodder in a decomposed condition. Two dug and walled wells on premises from which the 3 families received their water supply; well No. 1 is located alongside of barn yard and covered with two slate slabs; well No. 2 is covered with planks and in a decayed condition; I also found a spring, un-walled and unprotected from surface drainage, 200 yards from barn and on a lower plane. The occupants of house No. 1 numbered 7, four of whom were ill with typhoid fever; house No. 2 consisted of 4 members, all of whom were ill with typhoid fever, and house No. 3 consisted of 5 members, all of whom were ill with typhoid fever.

A visitor to house No. 3 contracted typhoid fever and died. Two children from Winterstown Borough visited house No. 2 and contracted typhoid fever. About ten years ago there was one case of typhoid fever on the premises. No dairy products sold from any of the premises. Physicians in attendance had reported 4 cases as typhoid fever, the remaining eleven cases I reported to the Health Officer of N. Hopewell Township. No precautions against the spread of the disease had been taken except in the home where the visitor died.

From information obtained I was constrained to believe that the water in the wells and spring mentioned, was unfit for drinking purposes and reported same to the Department, after which containers were forwarded to the Health Officer to collect samples of water for biological examination. The first cases of typhoid fever occurred in the person of R. E. who was suffering from tuberculosis and had occupied the premises on an estate about one month when he was taken ill and treated for tuberculosis, from which he was supposed to have died June 9th; his wife, mother-in-law and two nephews, all of whom had spent more or less time during the illness, in doing general work about the premises, fell ill with typhoid fever; they drank water from well No. 2. No further spread of the infection after my inspection of the estate, as the entire community was ready to accept the only rational conclusion; that the illness was due to water on premises. I ordered all water for drinking purposes to be boiled 30 minutes, and explained the danger of anyone drinking water from wells and springs. I later instructed the owner of estate to cleanse the 3 sources of water supply according to rules furnished him taken from the manual.

DAIRY FARMS INSPECTED FOR TYPHOID FEVER.

July 29. On receipt of a card form from the Health Officer in Manheim Township. I visited said premises July 30 found two sons of E. B. R. ill with typhoid fever, aged 16 and 30 years respectively, and both being nursed by the parents. Lime used freely and discharges deposited in ditch.

A daughter aged 14 years was taken ill with typhoid fever April 27th, with this exception, there is no previous history of typhoid fever on the premises.

Water used in house by family is from a spring located 400 feet from dwelling, piped through wooden pipes through to dairy house, 10 feet distant; owing to dry weather this spring gave out about April 1st, since which time, the family has been using water from a dug and walled well 16 feet deep (now containing 7 feet) located 100 feet, from house and 10 feet from barn yard and on a lower plane than barn yard. The platform covering the well is of wood, the planks do not fit tight, consequently water can run into well. During illness of daughter specimens of water from spring and well were sent to the State Laboratory and report from this examination indicated that the water from spring was free from *B. coli*, but, that of the well contained a number of *B. coli*. The Health Officer notified Mr. R. to cleanse his well according to rules given in the Manual, which he agreed to do, but never did.

The general condition and surroundings of the premises are in excellent sanitary condition and from information obtained, I feel

quite certain that the water in shallow well near barn yard, is the source of infection. It is interesting to note, that the family never used well water until after the water in spring gave out April 1st.

Fifteen gallons of milk shipped daily to Baltimore, Md., milking done by son and daughter living in same house with sick. I instructed him that his dairy should be put in charge of someone living apart from the sick, he agreed to transfer his cattle to two farms owned and farmed by two sons, also to cleanse the well at once, and to boil all water used for drinking purposes. About September 11 samples of water were sent to the State Laboratory, two from spring, and two from well, which were taken after the well had been cleansed. Immediately on receipt of the analysis I notified Mr. R. by letter, that the water in this well was not pure and should under no circumstances, be used in the family and dairy, and suggested that he abandon the well, as the water was contaminated by the impurities from the barn yard.

September 28. A farmer living in Fawn Township visited me at my office and reported that his grandson aged 7 years, a resident of Nebraska, was visiting on his premises and had been ill with typhoid fever for 5 weeks; this case was attended by a physician, but not diagnosed as typhoid fever until after his removal to a hospital for an operation, when a careful examination revealed that the boy was convalescing from an attack of typhoid fever; soon after his removal to the hospital his mother and brother were both taken ill with typhoid fever and treated in same hospital for said disease. He has lived on these premises for 30 years, and during this period there have been no cases of typhoid fever neither are there any known cases of typhoid fever in neighborhood at this time.

The water supply is from a dug and walled well 30 feet deep, and in good condition. General surroundings in sanitary condition. Milk from six cows shipped daily to a creamery nearby, from which place butter is made and shipped to Baltimore, Md. Milking has been done by two daughters, who were closely associated with sick. There seems little doubt that the disease was contracted by visitors from the west enroute from Nebraska.

Inasmuch as the typhoid fever patients had been removed from premises I instructed the Health Officer in Fawn Township to fumigate the premises at once; I gave further instructions to have dairy, dairy utensils and privy cleansed.

DIPHTHERIA.

December 29th. Received letter from the Health Officer in N. Hopewell Township reporting an unreported case of diphtheria. I immediately investigated the report and found that a child had died of diphtheria December 24. This case was attended by a physician

but was not reported until after death. December 29, another physician was employed to attend another member of the family aged 17 years, and he promptly diagnosed the case as diphtheria, reported same to the Health Officer and house was placarded. Antitoxin was administered to the sick, and the remaining 4 children in family were given immunizing doses of antitoxin. The school which the children had been attending I ordered closed and fumigated. Upon further investigation I learned that mother of deceased had suffered an attack of sore throat about 3 weeks previous to death of child. Examination revealing paralysis of the velum palatum. She was attended by some physician who attended deceased but failed to establish diagnosis of diphtheria. Source of contagion could not be ascertained.

OUTBREAK OF DIPHTHERIA IN BOROUGH AND TOWNSHIP.

March 25. On receipt of instructions from the Department to investigate an alleged outbreak of diphtheria in Hellam Borough and Hellam Township, I visited borough and township March 28th, and made an investigation, found 10 cases in township and four in borough, all the cases had been reported and were under quarantine. One death in borough and one in township. Could not ascertain source of infection. I ordered three schools and one church in the township closed and fumigated. The people in the borough, as well as the health authorities were, generally, willing to co-operate in aiding to further prevent the spread of diphtheria. The Board of Health agreed to close churches, schools and all public meeting places for 21 days or longer if necessary. After this action there was no further spread of the disease.

DAIRY FARMS INSPECTED FOR DIPHTHERIA.

November 3. On receipt of a card from Health Officer in Fairview Township reporting diphtheria on dairy farm of J. A. P., I visited said premises and found the son had died of laryngeal diphtheria November 2. Dr. S. A. K. first visited the patient November 1, and promptly administered antitoxin, mother of child complained that her boy had died from giving him antitoxin, and she would allow no more of her children to be given that "stuff." This family consists of 8 children and 2 adults, 3 children attended the school, which had been closed on account of diphtheria in other families. It is probable that at least two of these children had mild attacks of diphtheria previous to death of the son, and no physician was employed.

Eighteen to 22 gallons milk sold daily and retailed to residents of New Cumberland, Pa. Milking was done by mother of patient previous to November 3, after which dairy was put in charge of one who

sleeps in barn and does not come in contact with sick; under these circumstances I permitted them to continue sale of milk. I learned during the inspection of a number of cases of diphtheria in this neighborhood and suggested to the School Board that in addition to having the school room cleansed and fumigated, that they burn all the books, which they did; this stamped out diphtheria in this school district.

September 26. Received phone message in the evening from the Health Officer in L. Chanceford Township, stating that diphtheria had been reported on a dairy farm, which I visited, and the family consisted of 9 children and 3 adults. One week before a child aged 6 years began complaining. The case was promptly diagnosed by Dr. W. as diphtheria, and September 24th, the child died. The house was placarded September 26th. I examined all members of the family and found three ill with diphtheria; family doctor promptly administered antitoxin to all children in the family, thus immunizing those not afflicted. A neighbor's child who was ill with sore throat, not attending school and no physician in attendance, played with child who died; I reported this case to the Health Officer and the quarantine period having expired, he at once fumigated the house.

Six and one-half gallons milk sold daily to Sunnyburn Creamery. After explaining the danger of contaminating the milk, he agreed at once to stop the sale of milk during the quarantine period. Mr. C. being a school director, ordered the Mt. Pleasant school closed September 26. I continued this order, permitting the school to be reopened only after school rooms and books had been thoroughly fumigated; he was in perfect accord with the health laws and co-operated cheerfully in aiding the H. O. in preventing the spread of diphtheria.

DAIRY FARMS INSPECTED FOR SCARLET FEVER.

October 21. On receipt of card form, from Health Officer in Codorus Township reporting scarlet fever on dairy farm of H. M., said township, and that butter was made and sold from premises, together with the Health Officer I visited the premises and found a child 8 years old sick with a mild attack of scarlet fever, and no physician in attendance. I reported the case to the Health Officer. October 15, another child 11 years old was taken ill, a doctor was called and he diagnosed the case scarlet fever. The first case was no doubt contracted while en route on the railroad coach to the County Fair. Children have been nursed by their mother who also had charge of dairy. Ten pounds of butter made weekly and shipped to Baltimore. The householder refused to drive his cattle to a neighboring farm and seemed unable to find someone to take charge of the dairy, but reluctantly agreed to discontinue sale of butter

during quarantine period. As the children had attended the Saubel school, I ordered the same closed and fumigated.

November 6. On receipt of card form from the Health Officer in L. Chanceford Township reporting scarlet fever on a dairy farm I visited said farm November 7, accompanied by the Health Officer and found one boy aged 14 years ill with scarlet fever, and a physician in attendance. Source of contagion could not be ascertained. The boy had not attended public school this term. The family attended church and Sunday School regularly, and while none seemed to know of a case of scarlet fever in the neighborhood, I rather suspect that there has been mild scarlet fever in some of the families attending said church and Sunday School, which I instructed the Health Officer to watch over. Milking has been done by parents of patient, 50 pounds milk sold daily to a creamery nearby. Sale of milk was stopped by Health Officer when he placarded house. I continued this order, explaining to the householder the necessity of dairy being in charge of persons living apart from house quarantined.

November 5. Received card from Health Officer in W. Manheim Township, reporting scarlet fever on a dairy farm. Accompanied by the Health Officer, I visited said premises and found a child 6 years old had been taken slightly ill while attending Mount Ventus School, Maryland, after which she remained at home. No physician was employed and probably no one knew that she had a mild attack of scarlet fever until October 26 when a brother aged 4 years was taken quite ill when the case was promptly diagnosed scarlet fever. This family attended neither church nor Sunday School, the only place the children have been during the past month has been school mentioned, where it is rumored that mild cases of scarlet fever have existed. The school being in Maryland and out of my jurisdiction, I therefore did not make an investigation. Children were nursed by their mother who was closely associated with her husband in taking care of the dairy. Seventeen pounds butter made and sold weekly to a huckster, who ships same to Baltimore, Md. Being unable to find some one who would attend to the dairy, he procured the services of a neighbor $\frac{1}{4}$ mile distant to take entire charge of the dairy during quarantine period, and he was perfectly satisfied to comply with the rules and regulations of the Department. The school authorities were notified about the prevalence of scarlet fever in Mount Ventus School.

INVESTIGATION OF MUMPS.

October 18. Received card from the Health Officer in Fawn Township reporting mumps on the premises of a colored family, no physician in attendance. Accompanied by the Health Officer I visited said premises, confirmed the diagnosis of mumps in two members, aged 19 and 23 respectively. On further inquiry I found another colored

family in same neighborhood, Hopewell Township, had a child ill with mumps. I visited the family, examined a boy aged 11 years, reported the case, ordered immediate fumigation, and kept the boy out of school two weeks; also ordered the schools fumigated where the children attended. I further found that two young men aged 18 and 20 years in Hopewell Township had suffered with mumps during September and were the first known cases of mumps in neighborhood; all cases seen were directly traced to contact with these. Sources of these could not be ascertained.

VARICELLA.

December 20. On receipt of card from Health Officer in Dover Township reporting chickenpox on a premises which I visited and found a large family of six children all having, or had the chickenpox since December 4. No physician in attendance. I confirmed the diagnosis and reported the cases to the Health Officer. Four of the children having been regularly attending Roller School, which no doubt was the source of contagion. I closed the school and notified the Secretary of School Board to fumigate the room before reopening.

Statistical Summary of Work Performed During the Year 1911.

Forms 34 received,	558		
Forms 37 received,	462		
Forms 36 received,	537		
Examined cases alleged to be		Dairy farms inspected for	
Typhoid fever,	38	Typhoid fever,	20
Diphtheria,	16	Diphtheria,	2
Scarlet fever,	6	Scarlet fever,	4
Varicella,	6		
Mumps,	3		

Stock transferred on premises—one.

Sale of milk stopped on 13 premises.

School ordered closed—eighteen—Reasons, diphtheria, scarlet fever, etc.

39 Health Officers instructed at office.

Two investigations of epidemics in boroughs.



School Medical Inspection

FOURTH CLASS DISTRICTS, 1911.



SCHOOL MEDICAL INSPECTION—FOURTH CLASS DISTRICTS.

School Year 1911.

No. schools inspected,	3,572
No. pupils enrolled,	172,561
No. pupils inspected,	145,499
No. pupils not defective,	33,878
No. pupils defective,	111,621
Total No. defects,	256,209
EYES	
Defective vision, right eye,	35,295
Defective vision, left eye,	36,296
Corneal defects, slight,	1,131
Corneal defects, serious,	165
Corneal defects, blindness,	146
HEARING	
Defective hearing, right ear,	4,897
Defective hearing, left ear,	5,631
Right otorrhea, slight,	1,356
Right otorrhea, profuse,	96
Right otorrhea, offensive,	49
Left otorrhea, slight,	1,626
Left otorrhea, profuse,	109
Left otorrhea, offensive,	89
BREATHING	
Slight impairment,	11,917
Serious impairment,	1,554
Mouth breathing,	2,188
TEETH	
Unclean,	22,794
Decayed,	49,811
TONSILS	
Slightly enlarged,	36,097
Greatly enlarged,	13,552
Acutely inflamed,	1,506
ENLARGED CERVICAL GLANDS,	12,548
TUBERCULOSIS	
Lungs,	168
Glands,	111
Bones,	21
Joints,	40
NERVOUS DISEASE	
Chorea,	221
Epilepsy,	67
SKIN DISEASE,	442
HEAD LICE	
Nits,	984
Lice,	201
Crusted scalp,	287
DEFORMITIES,	517
NUTRITION	
Fair,	13,963
Poor,	775
MISCELLANEOUS DEFECTS,	
No. pupils having 1 defect,	38,649
No. pupils having 2 defects,	32,903
No. pupils having 3 defects,	20,938
No. pupils having 4 defects,	11,237
No. pupils having 5 defects,	4,854
No. pupils having 6 defects,	2,023
No. pupils having 7 defects,	691
No. pupils having 8 defects,	224
No. pupils having 9 defects,	74
No. pupils having 10 or more defects,	28

SCHOOL MEDICAL INSPECTION—FOURTH CLASS DISTRICTS.

School Year 1911 and 1912.

ADAMS COUNTY.

No. schools inspected,	74
No. pupils enrolled,	2,888
No. pupils inspected,	2,419
No. pupils not defective,	467
No. pupils defective,	1,952
Total No. defects,	4,485

EYES

Defective vision, right eye,	903
Defective vision, left eye,	881
Corneal defects, slight,	67
Corneal defects, serious,	8
Corneal defects, blindness,	1

HEARING

Defective hearing, right ear,	87
Defective hearing, left ear,	90
Right otorrhea, slight,	5
Right otorrhea, profuse,	1
Right otorrhea, offensive,	1
Left otorrhea, slight,	8
Left otorrhea, profuse,	1
Left otorrhea, offensive,	6

BREATHING

Slight impairment,	260
Serious impairment,	34
Mouth breathing,	43

TEETH

Unclean,	265
Decayed,	812

TONSILS

Slightly enlarged,	594
Greatly enlarged,	147
Acutely inflamed,	18

ENLARGED CERVICAL GLANDS,

77

TUBERCULOSIS

Lungs,	2
Glands,	0
Bones,	0
Joints,	0

NERVOUS DISEASE

Chorea,	2
Epilepsy,	1

SKIN DISEASE, 0

HEAD LICE

Nits,	2
Lice,	1
Crusted scalp,	0

DEFORMITIES, 23

NUTRITION

Fair,	135
Poor,	2

MISCELLANEOUS DEFECTS, 8

No. pupils having 1 defect,	578
No. pupils having 2 defects,	680
No. pupils having 3 defects,	410
No. pupils having 4 defects,	162
No. pupils having 5 defects,	81
No. pupils having 6 defects,	30
No. pupils having 7 defects,	6
No. pupils having 8 defects,	4
No. pupils having 9 defects,	0
No. pupils having 10 or more defects,	1

ALLEGHENY COUNTY.

No. schools inspected,	63
No. pupils enrolled,	6,367
No. pupils inspected,	5,827
No. pupils not defective,	1,310
No. pupils defective,	4,517
Total No. defects,	12,242
EYES	
Defective vision, right eye,	1,776
Defective vision, left eye,	1,771
Corneal defects, slight,	23
Corneal defects, serious,	8
Corneal defects, blindness,	6
HEARING	
Defective hearing, right ear,	334
Defective hearing, left ear,	310
Right otorrhea, slight,	55
Right otorrhea, profuse,	5
Right otorrhea, offensive,	1
Left otorrhea, slight,	63
Left otorrhea, profuse,	6
Left otorrhea, offensive,	4
BREATHING	
Slight impairment,	496
Serious impairment,	121
Mouth breathing,	201
TEETH	
Unclean,	908
Decayed,	1,708
TONSILS	
Slightly enlarged,	1,542
Greatly enlarged,	769
Acutely inflamed,	72
ENLARGED CERVICAL GLANDS,	
	603
TUBERCULOSIS	
Lungs,	24
Glands,	2
Bones,	1
Joints,	0
NERVOUS DISEASE	
Chorea,	15
Epilepsy,	5
SKIN DISEASE,	
	15
HEAD LICE	
Nits,	92
Lice,	9
Crusted scalp,	1
DEFORMITIES,	
	43
NUTRITION	
Fair,	886
Poor,	66
MISCELLANEOUS DEFECTS,	
	1
No. pupils having 1 defect,	1,247
No. pupils having 2 defects,	1,220
No. pupils having 3 defects,	868
No. pupils having 4 defects,	528
No. pupils having 5 defects,	317
No. pupils having 6 defects,	187
No. pupils having 7 defects,	94
No. pupils having 8 defects,	37
No. pupils having 9 defects,	14
No. pupils having 10 or more defects,	5

ARMSTRONG COUNTY.

No. schools inspected,	39
No. pupils enrolled,	1,171
No. pupils inspected,	916
No. pupils not defective,	81
No. pupils defective,	835
Total No. defects,	1,982
EYES	
Defective vision, right eye,	277
Defective vision, left eye,	301
Corneal defects, slight,	36
Corneal defects, serious,	2
Corneal defects, blindness,	2
HEARING	
Defective hearing, right ear,	45
Defective hearing, left ear,	9
Right otorrhea, slight,	0
Right otorrhea, profuse,	0
Right otorrhea, offensive,	12
Left otorrhea, slight,	0
Left otorrhea, profuse,	0
Left otorrhea, offensive,	0
BREATHING	
Slight impairment,	84
Serious impairment,	37
Mouth breathing,	2
TEETH	
Unclean	158
Decayed,	502
TONSILS	
Slightly enlarged,	201
Greatly enlarged,	134
Acutely inflamed,	7
ENLARGED CERVICAL GLANDS,	36
TUBERCULOSIS	
Lungs,	0
Glands,	0
Bones,	0
Joints,	1
NERVOUS DISEASE	
Chorea,	2
Epilepsy,	1
SKIN DISEASE,	3
HEAD LICE	
Nits,	1
Lice,	1
Crusted scalp,	0
DEFORMITIES,	3
NUTRITION	
Fair,	65
Poor,	14
MISCELLANEOUS DEFECTS,	
No. pupils having 1 defect,	3
No. pupils having 2 defects,	253
No. pupils having 3 defects,	243
No. pupils having 4 defects,	198
No. pupils having 5 defects,	86
No. pupils having 6 defects,	32
No. pupils having 7 defects,	19
No. pupils having 8 defects,	2
No. pupils having 9 defects,	1
No. pupils having 10 or more defects,	1
	0

BEAVER COUNTY.

No. schools inspected,	22
No. pupils enrolled,	2,238
No. pupils inspected,	1,895
No. pupils not defective,	417
No. pupils defective,	1,478
Total No. defects,	3,681
EYES	
Defective vision, right eye,	353
Defective vision, left eye,	412
Corneal defects, slight,	10
Corneal defects, serious,	1
Corneal defects, blindness,	1
HEARING	
Defective hearing, right ear,	107
Defective hearing, left ear,	89
Right otorrhea, slight,	73
Right otorrhea, profuse,	0
Right otorrhea, offensive,	3
Left otorrhea, slight,	62
Left otorrhea, profuse,	0
Left otorrhea, offensive,	2
BREATHING	
Slight impairment,	131
Serious impairment,	61
Mouth breathing,	40
TEETH	
Unclean,	390
Decayed,	683
TONSILS	
Slightly enlarged,	390
Greatly enlarged,	220
Acutely inflamed,	10
ENLARGED CERVICAL GLANDS,	
	348
TUBERCULOSIS	
Lungs,	0
Glands,	1
Bones,	0
Joints,	0
NERVOUS DISEASE	
Chorea,	1
Epilepsy,	0
SKIN DISEASE,	
	4
HEAD LICE	
Nits,	23
Lice,	3
Crusted scalp,	6
DEFORMITIES,	
	5
NUTRITION	
Fair,	270
Poor,	27
MISCELLANEOUS DEFECTS,	
	4
No. pupils having 1 defect,	435
No. pupils having 2 defects,	413
No. pupils having 3 defects,	285
No. pupils having 4 defects,	181
No. pupils having 5 defects,	85
No. pupils having 6 defects,	34
No. pupils having 7 defects,	13
No. pupils having 8 defects,	7
No. pupils having 9 defects,	5
No. pupils having 10 or more defects,	0

BEDFORD COUNTY.

No. schools inspected,	83
No. pupils enrolled,	2,832
No. pupils inspected,	2,347
No. pupils not defective,	370
No. pupils defective,	1,977
Total No. defects,	4,782
EYES	
Defective vision, right eye,	449
Defective vision, left eye,	488
Corneal defects, slight,	12
Corneal defects, serious,	1
Corneal defects, blindness,	0
HEARING	
Defective hearing, right ear,	92
Defective hearing, left ear,	101
Right otorrhea, slight,	22
Right otorrhea, profuse,	0
Right otorrhea, offensive,	0
Left otorrhea, slight,	22
Left otorrhea, profuse,	0
Left otorrhea, offensive,	1
BREATHING	
Slight impairment,	34
Serious impairment,	5
Mouth breathing,	14
TEETH	
Unclean,	348
Decayed,	1,452
TONSILS	
Slightly enlarged,	1,028
Greatly enlarged,	207
Acutely inflamed,	7
ENLARGED CERVICAL GLANDS,	5
TUBERCULOSIS	
Lungs,	0
Glands,	1
Bones,	0
Joints,	0
NERVOUS DISEASE	
Chorea,	1
Epilepsy,	11
SKIN DISEASE,	39
HEAD LICE	
Nits,	0
Lice,	0
Crusted scalp,	0
DEFORMITIES,	2
NUTRITION	
Fair,	423
Poor,	15
MISCELLANEOUS DEFECTS,	
No. pupils having 1 defect,	2
No. pupils having 2 defects,	577
No. pupils having 3 defects,	727
No. pupils having 4 defects,	314
No. pupils having 5 defects,	143
No. pupils having 6 defects,	120
No. pupils having 7 defects,	52
No. pupils having 8 defects,	30
No. pupils having 9 defects,	11
No. pupils having 10 or more defects,	3
	0

BERKS COUNTY.

No. schools inspected,	117
No. pupils enrolled,	3,962
No. pupils inspected,	3,539
No. pupils not defective,	1,444
No. pupils defective,	2,095
Total No. defects,	4,595

EYES

Defective vision, right eye,	932
Defective vision, left eye,	902
Corneal defects, slight,	8
Corneal defects, serious,	1
Corneal defects, blindness,	1

HEARING

Defective hearing, right ear,	51
Defective hearing, left ear,	59
Right otorrhea, slight,	40
Right otorrhea, profuse,	9
Right otorrhea, offensive,	0
Left otorrhea, slight,	36
Left otorrhea, profuse,	9
Left otorrhea, offensive,	1

BREATHING

Slight impairment,	188
Serious impairment,	21
Mouth breathing,	36

TEETH

Unclean,	258
Decayed,	1,043

TONSILS

Slightly enlarged,	474
Greatly enlarged,	218
Acutely inflamed,	36

ENLARGED CERVICAL GLANDS,	88
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TUBERCULOSIS

Lungs,	0
Glands,	0
Bones,	1
Joints,	1

NERVOUS DISEASE

Chorea,	11
Epilepsy,	2

SKIN DISEASE,	6
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HEAD LICE

Nits,	0
Lice,	1
Crusted scalp,	0

DEFORMITIES,	15
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NUTRITION

Fair,	143
Poor,	4

MISCELLANEOUS DEFECTS,	0
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No. pupils having 1 defect,	705
No. pupils having 2 defects,	637
No. pupils having 3 defects,	407
No. pupils having 4 defects,	217
No. pupils having 5 defects,	57
No. pupils having 6 defects,	19
No. pupils having 7 defects,	5
No. pupils having 8 defects,	1
No. pupils having 9 defects,	0
No. pupils having 10 or more defects,	0

BLAIR COUNTY.

No. schools inspected,	19
No. pupils enrolled,	880
No. pupils inspected,	692
No. pupils not defective,	40
No. pupils defective,	652
Total No. defects,	1,756
EYES	
Defective vision, right eye,	172
Defective vision, left eye,	175
Corneal defects, slight,	0
Corneal defects, serious,	1
Corneal defects, blindness,	1
HEARING	
Defective hearing, right ear,	57
Defective hearing, left ear,	57
Right otorrhea, slight,	1
Right otorrhea, profuse,	0
Right otorrhea, offensive,	0
Left otorrhea, slight,	0
Left otorrhea, profuse,	1
Left otorrhea, offensive,	0
BREATHING	
Slight impairment,	135
Serious impairment,	15
Mouth breathing,	3
TEETH	
Unclean,	339
Decayed,	159
TONSILS	
Slightly enlarged,	317
Greatly enlarged,	46
Acutely inflamed,	2
ENLARGED CERVICAL GLANDS,	171
TUBERCULOSIS	
Lungs,	0
Glands,	0
Bones,	0
Joints,	0
NERVOUS DISEASE	
Chorea,	5
Epilepsy,	0
SKIN DISEASE,	16
HEAD LICE	
Nits,	6
Lice,	0
Crusted scalp,	0
DEFORMITIES,	2
NUTRITION	
Fair,	74
Poor,	0
MISCELLANEOUS DEFECTS,	
No. pupils having 1 defect,	1
No. pupils having 2 defects,	163
No. pupils having 3 defects,	174
No. pupils having 4 defects,	136
No. pupils having 5 defects,	105
No. pupils having 6 defects,	42
No. pupils having 7 defects,	20
No. pupils having 8 defects,	9
No. pupils having 9 defects,	3
No. pupils having 10 or more defects,	0

BUTLER COUNTY.

No. schools inspected,	61
No. pupils enrolled,	2,119
No. pupils inspected,	1,741
No. pupils not defective,	398
No. pupils defective,	1,343
Total No. defects,	2,814
EYES	
Defective vision, right eye,	360
Defective vision, left eye,	354
Corneal defects, slight,	12
Corneal defects, serious,	12
Corneal defects, blindness,	1
HEARING	
Defective hearing, right ear,	105
Defective hearing, left ear,	104
Right otorrhea, slight,	7
Right otorrhea, profuse,	1
Right otorrhea, offensive,	0
Left otorrhea, slight,	16
Left otorrhea, profuse,	1
Left otorrhea, offensive,	0
BREATHING	
Slight impairment,	30
Serious impairment,	1
Mouth breathing,	4
TEETH	
Unclean,	361
Decayed,	535
TONSILS	
Slightly enlarged,	381
Greatly enlarged,	217
Acutely inflamed,	64
ENLARGED CERVICAL GLANDS,	50
TUBERCULOSIS	
Lungs,	2
Glands,	0
Bones,	0
Joints,	1
NERVOUS DISEASE	
Chorea,	6
Epilepsy,	1
SKIN DISEASE,	2
HEAD LICE	
Nits,	0
Lice,	0
Crusted scalp,	0
DEFORMITIES,	5
NUTRITION	
Fair,	173
Poor,	8
MISCELLANEOUS DEFECTS,	
No. pupils having 1 defect,	0
No. pupils having 2 defects,	579
No. pupils having 3 defects,	376
No. pupils having 4 defects,	158
No. pupils having 5 defects,	121
No. pupils having 6 defects,	51
No. pupils having 7 defects,	29
No. pupils having 8 defects,	10
No. pupils having 9 defects,	1
No. pupils having 10 or more defects,	0

BRADFORD COUNTY.

No. schools inspected,	50
No. pupils enrolled,	2,188
No. pupils inspected,	1,988
No. pupils not defective,	233
No. pupils defective,	1,755
Total No. defects,	4,534
EYES	
Defective vision, right eye,	470
Defective vision, left eye,	516
Corneal defects, slight,	5
Corneal defects, serious,	4
Corneal defects, blindness,	1
HEARING	
Defective hearing, right ear,	93
Defective hearing, left ear,	115
Right otorrhea, slight,	93
Right otorrhea, profuse,	2
Right otorrhea, offensive,	1
Left otorrhea, slight,	231
Left otorrhea, profuse,	2
Left otorrhea, offensive,	0
BREATHING	
Slight impairment,	299
Serious impairment,	23
Mouth breathing,	48
TEETH	
Unclean,	537
Decayed,	683
TONSILS	
Slightly enlarged,	684
Greatly enlarged,	212
Acutely inflamed,	9
ENLARGED CERVICAL GLANDS,	53
TUBERCULOSIS	
Lungs,	1
Glands,	14
Bones,	0
Joints,	1
NERVOUS DISEASE	
Chorea,	6
Epilepsy,	2
SKIN DISEASE,	11
HEAD LICE	
Nits,	3
Lice,	5
Crusted scalp,	31
DEFORMITIES,	12
NUTRITION	
Fair,	352
Poor,	9
MISCELLANEOUS DEFECTS,	
No. pupils having 1 defect,	6
No. pupils having 2 defects,	453
No. pupils having 3 defects,	499
No. pupils having 4 defects,	385
No. pupils having 5 defects,	244
No. pupils having 6 defects,	113
No. pupils having 7 defects,	48
No. pupils having 8 defects,	10
No. pupils having 9 defects,	0
No. pupils having 10 or more defects,	1
	2

BUCKS COUNTY.

No. schools inspected,	37
No. pupils enrolled,	2,286
No. pupils inspected,	2,040
No. pupils not defective,	695
No. pupils defective,	1,345
Total No. defects,	3,116
EYES	
Defective vision, right eye,	418
Defective vision, left eye,	445
Corneal defects, slight,	10
Corneal defects, serious,	2
Corneal defects, blindness,	0
HEARING	
Defective hearing, right ear,	52
Defective hearing, left ear,	51
Right otorrhea, slight,	11
Right otorrhea, profuse,	1
Right otorrhea, offensive,	0
Left otorrhea, slight,	13
Left otorrhea, profuse,	3
Left otorrhea, offensive,	1
BREATHING	
Slight impairment,	231
Serious impairment,	14
Mouth breathing,	22
TEETH	
Unclean,	299
Decayed,	568
TONSILS	
Slightly enlarged,	407
Greatly enlarged,	78
Acutely inflamed,	12
ENLARGED CERVICAL GLANDS,	148
TUBERCULOSIS	
Lungs,	2
Glands,	0
Bones,	1
Joints,	1
NERVOUS DISEASE	
Chorea,	5
Epilepsy,	2
SKIN DISEASE,	6
HEAD LICE	
Nits,	3
Lice,	0
Crusted scalp,	0
DEFORMITIES,	5
NUTRITION	
Fair,	290
Poor,	12
MISCELLANEOUS DEFECTS,	
No. pupils having 1 defect,	3
No. pupils having 2 defects,	475
No. pupils having 3 defects,	348
No. pupils having 4 defects,	283
No. pupils having 5 defects,	143
No. pupils having 6 defects,	66
No. pupils having 7 defects,	17
No. pupils having 8 defects,	12
No. pupils having 9 defects,	1
No. pupils having 10 or more defects,	0

CLEARFIELD COUNTY.

No. schools inspected,	128
No. pupils enrolled,	6,093
No. pupils inspected,	5,070
No. pupils not defective,	1,034
No. pupils defective,	4,036
Total No. defects,	8,961
EYES	
Defective vision, right eye,	1,080
Defective vision, left eye,	1,100
Corneal defects, slight,	8
Corneal defects, serious,	1
Corneal defects, blindness,	14
HEARING	
Defective hearing, right ear,	80
Defective hearing, left ear,	75
Right otorrhea, slight,	17
Right otorrhea, profuse,	3
Right otorrhea, offensive,	0
Left otorrhea, slight,	15
Left otorrhea, profuse,	4
Left otorrhea, offensive,	0
BREATHING	
Slight impairment,	167
Serious impairment,	21
Mouth breathing,	120
TEETH	
Unclean,	744
Decayed,	2,139
TONSILS	
Slightly enlarged,	1,680
Greatly enlarged,	750
Acutely inflamed,	73
ENLARGED CERVICAL GLANDS,	
	408
TUBERCULOSIS	
Lungs,	4
Glands,	3
Bones,	2
Joints,	3
NERVOUS DISEASE	
Chorea,	6
Epilepsy,	4
SKIN DISEASE,	
	12
HEAD LICE	
Nits,	3
Lice,	5
Crusted scalp,	12
DEFORMITIES,	
	10
NUTRITION	
Fair,	373
Poor,	19
MISCELLANEOUS DEFECTS,	
	6
No. pupils having 1 defect,	1,275
No. pupils having 2 defects,	1,444
No. pupils having 3 defects,	720
No. pupils having 4 defects,	428
No. pupils having 5 defects,	120
No. pupils having 6 defects,	31
No. pupils having 7 defects,	12
No. pupils having 8 defects,	3
No. pupils having 9 defects,	1
No. pupils having 10 or more defects,	2

CAMBRIA COUNTY.

No. schools inspected,	102
No. pupils enrolled,	8,262
No. pupils inspected,	6,451
No. pupils not defective,	1,475
No. pupils defective,	4,976
Total No. defects,	9,936

EYES

Defective vision, right eye,	968
Defective vision, left eye,	1,002
Corneal defects, slight,	318
Corneal defects, serious,	8
Corneal defects, blindness,	5

HEARING

Defective hearing, right ear,	82
Defective hearing, left ear,	77
Right otorrhea, slight,	14
Right otorrhea, profuse,	5
Right otorrhea, offensive,	2
Left otorrhea, slight,	17
Left otorrhea, profuse,	3
Left otorrhea, offensive,	3

BREATHING

Slight impairment,	256
Serious impairment,	38
Mouth breathing,	49

TEETH

Unclean,	687
Decayed,	2,907

TONSILS

Slightly enlarged,	1,363
Greatly enlarged,	572
Acutely inflamed,	37

ENLARGED CERVICAL GLANDS,	166
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TUBERCULOSIS

Lungs,	8
Glands,	0
Bones,	0
Joints,	2

NERVOUS DISEASE

Chorea,	9
Epilepsy,	0

SKIN DISEASE,	16
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HEAD LICE

Nits,	17
Lice,	22
Crusted scalp,	2

DEFORMITIES,	18
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NUTRITION

Fair,	250
Poor,	9

MISCELLANEOUS DEFECTS,	4
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No. pupils having 1 defect,	2,560
No. pupils having 2 defects,	1,395
No. pupils having 3 defects,	631
No. pupils having 4 defects,	287
No. pupils having 5 defects,	78
No. pupils having 6 defects,	20
No. pupils having 7 defects,	5
No. pupils having 8 defects,	0
No. pupils having 9 defects,	0
No. pupils having 10 or more defects,	0

CAMERON COUNTY.

No. schools inspected,	31
No. pupils enrolled,	1,152
No. pupils inspected,	1,056
No. pupils not defective,	259
No. pupils defective,	797
Total No. defects,	2,139
EYES	
Defective vision, right eye,	358
Defective vision, left eye,	442
Corneal defects, slight,	5
Corneal defects, serious,	0
Corneal defects, blindness,	1
HEARING	
Defective hearing, right ear,	51
Defective hearing, left ear,	35
Right otorrhea, slight,	36
Right otorrhea, profuse,	0
Right otorrhea, offensive,	0
Left otorrhea, slight,	29
Left otorrhea, offensive,	1
BREATHING	
Slight impairment,	147
Serious impairment,	77
Mouth breathing,	14
TEETH	
Unclean,	151
Decayed,	69
TONSILS	
Slightly enlarged,	228
Greatly enlarged,	217
Acutely inflamed,	80
ENLARGED CERVICAL GLANDS,	2
TUBERCULOSIS	
Lungs,	1
Glands,	0
Bones,	0
Joints,	1
NERVOUS DISEASE	
Chorea,	0
Epilepsy,	0
SKIN DISEASE,	7
HEAD LICE	
Nits,	8
Lice,	0
Crusted scalp,	0
DEFORMITIES,	4
NUTRITION	
Fair,	167
Poor,	7
MISCELLANEOUS DEFECTS,	1
No. pupils having 1 defect,	199
No. pupils having 2 defects,	214
No. pupils having 3 defects,	164
No. pupils having 4 defects,	125
No. pupils having 5 defects,	65
No. pupils having 6 defects,	21
No. pupils having 7 defects,	6
No. pupils having 8 defects,	1
No. pupils having 9 defects,	1
No. pupils having 10 or more defects,	1

CARBON COUNTY.

No. schools inspected,	20
No. pupils enrolled,	2,332
No. pupils inspected,	2,052
No. pupils not defective,	705
No. pupils defective,	1,347
Total No. defects,	2,838
EYES	
Defective vision, right eye,	485
Defective vision left eye,	466
Corneal defects, slight,	2
Corneal defects, serious,	0
Corneal defects, blindness,	0
HEARING	
Defective hearing, right ear,	67
Defective hearing, left ear,	72
Right otorrhea, slight,	5
Right otorrhea, profuse,	0
Right otorrhea, offensive,	1
Left otorrhea, slight,	4
Left otorrhea, profuse,	2
Left otorrhea, offensive,	2
BREATHING	
Slight impairment,	73
Serious impairment,	18
Mouth breathing,	65
TEETH	
Unclean,	337
Decayed,	635
TONSILS	
Slightly enlarged,	215
Greatly enlarged,	104
Acutely inflamed,	2
ENLARGED CERVICAL GLANDS,	
.....	122
TUBERCULOSIS	
Lungs,	1
Glands,	0
Bones,	1
Joints,	0
NERVOUS DISEASE	
Chorea,	2
Epilepsy,	0
SKIN DISEASE,	
.....	0
HEAD LICE	
Nits,	1
Lice,	0
Crusted scalp,	0
DEFORMITIES,	
.....	4
NUTRITION	
Fair,	144
Poor,	8
MISCELLANEOUS DEFECTS,	
.....	0
No. pupils having 1 defect,	524
No. pupils having 2 defects,	364
No. pupils having 3 defects,	219
No. pupils having 4 defects,	95
No. pupils having 5 defects,	30
No. pupils having 6 defects,	13
No. pupils having 7 defects,	3
No. pupils having 8 defects,	0
No. pupils having 9 defects,	0
No. pupils having 10 or more defects,	0

CENTRE COUNTY.

No. schools inspected,	37
No. pupils enrolled,	1,959
No. pupils inspected,	1,624
No. pupils not defective,	385
No. pupils defective,	1,239
Total No. defects,	2,795
EYES	
Defective vision, right eye,	442
Defective vision, left eye,	462
Corneal, defects, slight,	46
Corneal defects, serious,	2
Corneal defects, blindness,	3
HEARING	
Defective hearing, right ear,	52
Defective hearing, left ear,	72
Right otorrhea, slight,	16
Right otorrhea, profuse,	1
Right otorrhea, offensive,	1
Left otorrhea, slight,	19
Left otorrhea, profuse,	0
Left otorrhea, offensive,	0
BREATHING	
Slight impairment,	26
Serious impairment,	4
Mouth breathing,	19
TEETH	
Unclean,	314
Decayed,	367
TONSILS	
Slightly enlarged,	410
Greatly enlarged,	106
Acutely inflamed,	3
ENLARGED CERVICAL GLANDS,	10
TUBERCULOSIS	
Lungs,	1
Glands,	0
Bones,	0
Joints,	0
NERVOUS DISEASE	
Chorea,	0
Epilepsy,	0
SKIN DISEASE,	5
HEAD LICE	
Nits,	15
Lice,	9
Crusted scalp,	2
DEFORMITIES,	2
NUTRITION	
Fair,	308
Poor,	31
MISCELLANEOUS DEFECTS,	
No. pupils having 1 defect,	47
No. pupils having 2 defects,	375
No. pupils having 3 defects,	456
No. pupils having 4 defects,	230
No. pupils having 5 defects,	105
No. pupils having 6 defects,	49
No. pupils having 7 defects,	17
No. pupils having 8 defects,	5
No. pupils having 9 defects,	2
No. pupils having 10 or more defects,	0

CLAIRON COUNTY.

No. schools inspected,	35
No. pupils enrolled,	1,174
No. pupils inspected,	1,011
No. pupils not defective,	9
No. pupils defective,	1,002
Total No. defects,	2,982

EYES

Defective vision, right eye,	403
Defective vision, left eye,	431
Corneal defects, slight,	7
Corneal defects, serious,	1
Corneal defects, blindness,	1

HEARING

Defective hearing, right ear,	79
Defective hearing, left ear,	89
Right otorrhea, slight,	27
Right otorrhea, profuse,	0
Right otorrhea, offensive,	0
Left otorrhea, slight,	62
Left otorrhea, profuse,	1
Left otorrhea, offensive,	0

BREATHING

Slight impairment,	225
Serious impairment,	18
Mouth breathing,	30

TEETH

Unclean,	172
Decayed,	374

TONSILS

Slightly enlarged,	521
Greatly enlarged,	112
Acutely inflamed,	8

ENLARGED CERVICAL GLANDS,	227
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TUBERCULOSIS

Lungs,	1
Glands,	0
Bones,	0
Joints,	0

NERVOUS DISEASE

Chorea,	3
Epilepsy,	1

SKIN DISEASE,	9
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HEAD LICE

Nits,	1
Lice,	2
Crusted scalp,	0

DEFORMITIES,	3
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NUTRITION

Fair,	174
Poor,	0

MISCELLANEOUS DEFECTS,	0
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No. pupils having 1 defect,	195
No. pupils having 2 defects,	272
No. pupils having 3 defects,	238
No. pupils having 4 defects,	141
No. pupils having 5 defects,	76
No. pupils having 6 defects,	52
No. pupils having 7 defects,	22
No. pupils having 8 defects,	8
No. pupils having 9 defects,	6
No. pupils having 10 or more defects,	2

CHESTER COUNTY.

No. schools inspected,	96
No. pupils enrolled,	3,640
No. pupils inspected,	2,982
No. pupils not defective,	879
No. pupils defective,	2,103
Total No. defects,	3,987
EYES	
Defective vision, right eye,	601
Defective vision, left eye,	596
Corneal defects, slight,	3
Corneal defects, serious,	1
Corneal defects, blindness,	2
HEARING	
Defective hearing, right ear,	79
Defective hearing, left ear,	81
Right otorrhea, slight,	6
Right otorrhea, profuse,	2
Right otorrhea, offensive,	0
Left otorrhea, slight,	11
Left otorrhea, profuse,	2
Left otorrhea, offensive,	0
BREATHING	
Slight impairment,	62
Serious impairment,	68
Mouth breathing,	8
TEETH	
Unclean,	279
Decayed,	701
TONSILS	
Slightly enlarged,	590
Greatly enlarged,	696
Acutely inflamed,	68
ENLARGED CERVICAL GLANDS,	51
TUBERCULOSIS	
Lungs,	3
Glands,	1
Bones,	2
Joints,	3
NERVOUS DISEASE	
Chorea,	7
Epilepsy,	3
SKIN DISEASE,	10
HEAD LICE	
Nits,	30
Lice,	5
Crusted scalp,	0
DEFORMITIES,	1
NUTRITION	
Fair,	42
Poor,	5
MISCELLANEOUS DEFECTS,	
No. pupils having 1 defect,	30
No. pupils having 2 defects,	951
No. pupils having 3 defects,	657
No. pupils having 4 defects,	307
No. pupils having 5 defects,	154
No. pupils having 6 defects,	24
No. pupils having 7 defects,	7
No. pupils having 8 defects,	2
No. pupils having 9 defects,	0
No. pupils having 10 or more defects,	1
No. pupils having 10 or more defects,	0

CLINTON COUNTY.

No. schools inspected,	61
No. pupils enrolled,	2,012
No. pupils inspected,	1,801
No. pupils not defective,	637
No. pupils defective,	1,164
Total No. defects,	2,412
EYES	
Defective vision, right eye,	475
Defective vision, left eye,	461
Corneal defects, slight,	2
Corneal defects, serious,	0
Corneal defects, blindness,	0
HEARING	
Defective hearing, right ear,	48
Defective hearing, left ear,	56
Right otorrhea, slight,	3
Right otorrhea, profuse,	1
Right otorrhea, offensive,	0
Left otorrhea, slight,	1
Left otorrhea, profuse,	0
Left otorrhea, offensive,	0
BREATHING	
Slight impairment,	75
Serious impairment,	12
Mouth breathing,	0
TEETH	
Unclean,	128
Decayed,	620
TONSILS	
Slightly enlarged,	210
Greatly enlarged,	92
Acutely inflamed,	22
ENLARGED CERVICAL GLANDS,	50
TUBERCULOSIS	
Lungs,	1
Glands,	0
Bones,	1
Joints,	0
NERVOUS DISEASE	
Chorea,	2
Epilepsy,	0
SKIN DISEASE,	8
HEAD LICE	
Nits,	2
Lice,	3
Crusted scalp,	4
DEFORMITIES,	3
NUTRITION	
Fair,	121
Poor,	5
MISCELLANEOUS DEFECTS,	0
No. pupils having 1 defect,	467
No. pupils having 2 defects,	354
No. pupils having 3 defects,	196
No. pupils having 4 defects,	101
No. pupils having 5 defects,	34
No. pupils having 6 defects,	9
No. pupils having 7 defects,	3
No. pupils having 8 defects,	0
No. pupils having 9 defects,	0
No. pupils having 10 or more defects,	0

COLUMBIA COUNTY.

No. schools inspected,	68
No. pupils enrolled,	2,734
No. pupils inspected,	2,371
No. pupils not defective,	358
No. pupils defective,	2,013
Total No. defects,	4,473

EYES

Defective vision, right eye,	649
Defective vision, left eye,	636
Corneal defects, slight,	6
Corneal defects, serious,	4
Corneal defects, blindness,	2

HEARING

Defective hearing, right ear,	40
Defective hearing, left ear,	42
Right otorrhea, slight,	16
Right otorrhea, profuse,	2
Right otorrhea, offensive,	4
Left otorrhea, slight,	23
Left otorrhea, profuse,	2
Left otorrhea, offensive,	1

BREATHING

Slight impairment,	93
Serious impairment,	20
Mouth breathing,	13

TEETH

Unclean,	696
Decayed,	771

TONSILS

Slightly enlarged,	700
Greatly enlarged,	197
Acutely inflamed,	14

ENLARGED CERVICAL GLANDS, 109

TUBERCULOSIS

Lungs,	4
Glands,	0
Bones,	0
Joints,	0

NERVOUS DISEASE

Chorea,	5
Epilepsy,	5

SKIN DISEASE, 0

HEAD LICE

Nits,	0
Lice,	0
Crusted scalp,	0

DEFORMITIES, 11

NUTRITION

Fair,	385
Poor,	22

MISCELLANEOUS DEFECTS, 1

No. pupils having 1 defect,	655
No. pupils having 2 defects,	676
No. pupils having 3 defects,	386
No. pupils having 4 defects,	212
No. pupils having 5 defects,	51
No. pupils having 6 defects,	27
No. pupils having 7 defects,	5
No. pupils having 8 defects,	1
No. pupils having 9 defects,	0
No. pupils having 10 or more defects,	0

CRAWFORD COUNTY.

No. schools inspected,	102
No. pupils enrolled,	2,358
No. pupils inspected,	2,044
No. pupils not defective,	471
No. pupils defective,	1,573
Total No. defects,	4,274
EYES	
Defective vision, right eye,	555
Defective vision, left eye,	590
Corneal defects, slight,	9
Corneal defects, serious,	5
Corneal defects, blindness,	2
HEARING	
Defective hearing, right ear,	99
Defective hearing, left ear,	102
Right otorrhea, slight,	8
Right otorrhea, profuse,	1
Right otorrhea, offensive,	2
Left otorrhea, slight,	8
Left otorrhea, profuse,	2
Left otorrhea, offensive,	2
BREATHING	
Slight impairment,	226
Serious impairment,	23
Mouth breathing,	35
TEETH	
Unclean,	217
Decayed,	870
TONSILS	
Slightly enlarged,	573
Greatly enlarged,	161
Acutely inflamed,	16
ENLARGED CERVICAL GLANDS,	280
TUBERCULOSIS	
Lungs,	1
Glands,	0
Bones,	0
Joints,	1
NERVOUS DISEASE	
Chorea,	1
Epilepsy,	0
SKIN DISEASE,	6
HEAD LICE	
Nits,	0
Lice,	0
Crusted scalp,	1
DEFORMITIES,	7
NUTRITION	
Fair,	459
Poor,	13
MISCELLANEOUS DEFECTS,	
No. pupils having 1 defect,	0
No. pupils having 2 defects,	394
No. pupils having 3 defects,	421
No. pupils having 3 defects,	331
No. pupils having 4 defects,	216
No. pupils having 5 defects,	122
No. pupils having 6 defects,	60
No. pupils having 7 defects,	24
No. pupils having 8 defects,	3
No. pupils having 9 defects,	1
No. pupils having 10 or more defects,	1

CUMBERLAND COUNTY.

No. schools inspected,	64
No. pupils enrolled,	1,618
No. pupils inspected,	1,365
No. pupils not defective,	279
No. pupils defective,	1,086
Total No. defects,	2,695
EYES	
Defective vision, right eye,	198
Defective vision, left eye,	209
Corneal defects, slight,	6
Corneal defects, serious,	1
Corneal defects, blindness,	1
HEARING	
Defective hearing, right ear,	20
Defective hearing, left ear,	14
Right otorrhea, slight,	2
Right otorrhea profuse,	0
Right otorrhea, offensive,	2
Left otorrhea, slight,	4
Left otorrhea, profuse,	0
Left otorrhea, offensive,	0
BREATHING	
Slight impairment,	201
Serious impairment,	47
Mouth breathing,	6
TEETH	
Unclean,	422
Decayed,	291
TONSILS	
Slightly enlarged,	438
Greatly enlarged,	122
Acutely inflamed,	25
ENLARGED CERVICAL GLANDS,	488
TUBERCULOSIS	
Lungs,	1
Glands,	0
Bones,	1
Joints,	2
NERVOUS DISEASE	
Chorea,	1
Epilepsy,	0
SKIN DISEASE,	1
HEAD LICE	
Nits,	1
Lice,	0
Crusted scalp,	0
DEFORMITIES,	14
NUTRITION	
Fair,	143
Poor,	34
MISCELLANEOUS DEFECTS,	
No. pupils having 1 defect,	0
No. pupils having 2 defects,	354
No. pupils having 3 defects,	252
No. pupils having 4 defects,	225
No. pupils having 5 defects,	154
No. pupils having 6 defects,	69
No. pupils having 7 defects,	27
No. pupils having 8 defects,	3
No. pupils having 9 defects,	1
No. pupils having 10 or more defects,	0
	1

DAUPHIN COUNTY.

No. schools inspected,	66
No. pupils enrolled,	2,817
No. pupils inspected,	2,450
No. pupils not defective,	806
No. pupils defective,	1,644
Total No. defects,	3,502
EYES	
Defective vision, right eye,	426
Defective vision, left eye,	406
Corneal defects, slight,	43
Corneal defects, serious,	4
Corneal defects, blindness,	5
HEARING	
Defective hearing, right ear,	77
Defective hearing, left ear,	88
Right otorrhea, slight,	11
Right otorrhea, profuse,	0
Right otorrhea, offensive,	0
Left otorrhea, slight,	14
Left otorrhea, profuse,	1
Left otorrhea, offensive,	0
BREATHING	
Slight impairment,	146
Serious impairment,	30
Mouth breathing,	28
TEETH	
Unclean,	408
Decayed,	757
TONSILS	
Slightly enlarged,	533
Greatly enlarged,	150
Acutely inflamed,	7
ENLARGED CERVICAL GLANDS,	159
TUBERCULOSIS	
Lungs,	1
Glands,	2
Bones,	0
Joints,	0
NERVOUS DISEASE	
Chorea,	7
Epilepsy,	0
SKIN DISEASE,	3
HEAD LICE	
Nits,	3
Lice,	2
Crusted scalp,	1
DEFORMITIES,	5
NUTRITION	
Fair,	171
Poor,	9
MISCELLANEOUS DEFECTS,	
No. pupils having 1 defect,	5
No. pupils having 2 defects,	679
No. pupils having 3 defects,	474
No. pupils having 4 defects,	266
No. pupils having 5 defects,	127
No. pupils having 6 defects,	50
No. pupils having 7 defects,	26
No. pupils having 8 defects,	14
No. pupils having 9 defects,	7
No. pupils having 10 defects,	1
No. pupils having 10 or more defects,	0

DELAWARE COUNTY.

No. schools inspected,	74
No. pupils enrolled,	6,851
No. pupils inspected,	5,920
No. pupils not defective,	1,152
No. pupils defective,	4,768
Total No. defects,	11,613
EYES	
Defective vision, right eye,	1,773
Defective vision, left eye,	1,730
Corneal defects, slight,	5
Corneal defects, serious,	2
Corneal defects, blindness,	3
HEARING	
Defective hearing, right ear,	276
Defective hearing, left ear,	338
Right otorrhea, slight,	16
Right otorrhea, profuse,	2
Right otorrhea, offensive,	3
Left otorrhea, slight,	28
Left otorrhea, profuse,	3
Left otorrhea, offensive,	3
BREATHING	
Slight impairment,	655
Serious impairment,	55
Mouth breathing,	121
TEETH	
Unclean,	1,120
Decayed,	1,219
TONSILS	
Slightly enlarged,	1,694
Greatly enlarged,	717
Acutely inflamed,	33
ENLARGED CERVICAL GLANDS,	650
TUBERCULOSIS	
Lungs,	8
Glands,	13
Bones,	2
Joints,	2
NERVOUS DISEASE	
Chorea,	9
Epilepsy,	3
SKIN DISEASE,	61
HEAD LICE	
Nits,	95
Lice,	16
Crusted scalp,	14
DEFORMITIES,	35
NUTRITION	
Fair,	854
Poor,	54
MISCELLANEOUS DEFECTS,	
No. pupils having 1 defect,	1
No. pupils having 2 defects,	1,320
No. pupils having 3 defects,	1,576
No. pupils having 4 defects,	946
No. pupils having 5 defects,	541
No. pupils having 6 defects,	235
No. pupils having 7 defects,	106
No. pupils having 8 defects,	30
No. pupils having 9 defects,	9
No. pupils having 10 or more defects,	4
	1

ELK COUNTY.

No. schools inspected,	70
No. pupils enrolled,	3,131
No. pupils inspected,	2,738
No. pupils not defective,	812
No. pupils defective,	2,426
Total No. defects,	6,910
EYES	
Defective vision, right eye,	780
Defective vision, left eye,	747
Corneal defects, slight,	0
Corneal defects, serious,	0
Corneal defects, blindness,	1
HEARING	
Defective hearing, right ear,	34
Defective hearing, left ear,	31
Right otorrhea, slight,	3
Right otorrhea, profuse,	0
Right otorrhea, offensive,	2
Left otorrhea, slight,	4
Left otorrhea, profuse,	0
Left otorrhea, offensive,	0
BREATHING	
Slight impairment,	851
Serious impairment,	75
Mouth breathing,	26
TEETH	
Unclean,	450
Decayed,	1,109
TONSILS	
Slightly enlarged,	1,113
Greatly enlarged,	395
Acutely inflamed,	35
ENLARGED CERVICAL GLANDS,	841
TUBERCULOSIS	
Lungs,	10
Glands,	0
Bones,	0
Joints,	0
NERVOUS DISEASE	
Chorea,	3
Epilepsy,	1
SKIN DISEASE,	6
HEAD LICE	
Nits,	43
Lice,	3
Crusted scalp,	0
DEFORMITIES,	8
NUTRITION	
Fair,	322
Poor,	17
MISCELLANEOUS DEFECTS,	
No. pupils having 1 defect,	0
No. pupils having 2 defects,	507
No. pupils having 3 defects,	519
No. pupils having 4 defects,	649
No. pupils having 5 defects,	434
No. pupils having 6 defects,	238
No. pupils having 7 defects,	73
No. pupils having 8 defects,	9
No. pupils having 9 defects,	2
No. pupils having 10 defects,	0
No. pupils having 10 or more defects,	0

ERIE COUNTY.

No. schools inspected,	117
No. pupils enrolled,	4,222
No. pupils inspected,	3,699
No. pupils not defective,	535
No. pupils defective,	3,164
Total No. defects,	9,440
EYES	
Defective vision, right eye,	1,256
Defective vision, left eye,	1,259
Corneal defects, slight,	9
Corneal defects, serious,	6
Corneal defects, blindness,	6
HEARING	
Defective hearing, right ear,	208
Defective hearing, left ear,	215
Right otorrhea, slight,	231
Right otorrhea, profuse,	12
Right otorrhea, offensive,	0
Left otorrhea, slight,	227
Left otorrhea, profuse,	17
Left otorrhea, offensive,	1
BREATHING	
Slight impairment,	648
Serious impairment,	45
Mouth breathing,	189
TEETH	
Unclean,	1,170
Decayed,	910
TONSILS	
Slightly enlarged,	1,368
Greatly enlarged,	389
Acutely inflamed,	50
ENLARGED CERVICAL GLANDS,	
	666
TUBERCULOSIS	
Lungs,	1
Glands,	0
Bones,	0
Joints,	0
NERVOUS DISEASE	
Chorea,	1
Epilepsy,	1
SKIN DISEASE,	
	6
HEAD LICE	
Nits,	2
Lice,	2
Crusted scalp,	3
DEFORMITIES,	
	8
NUTRITION	
Fair,	523
Poor,	11
MISCELLANEOUS DEFECTS,	
	0
No. pupils having 1 defect,	603
No. pupils having 2 defects,	773
No. pupils having 3 defects,	762
No. pupils having 4 defects,	504
No. pupils having 5 defects,	295
No. pupils having 6 defects,	125
No. pupils having 7 defects,	65
No. pupils having 8 defects,	26
No. pupils having 9 defects,	9
No. pupils having 10 or more defects,	2

FAYETTE COUNTY.

No. schools inspected,	21
No. pupils enrolled,	1,585
No. pupils inspected,	1,091
No. pupils not defective,	161
No. pupils defective,	930
Total No. defects,	2,439
EYES	
Defective vision, right eye,	224
Defective vision, left eye,	237
Corneal defects, slight,	9
Corneal defects, serious,	1
Corneal defects, blindness,	2
HEARING	
Defective hearing, right ear,	33
Defective hearing, left ear,	34
Right otorrhea, slight,	60
Right otorrhea, profuse,	7
Right otorrhea, offensive,	0
Left otorrhea, slight,	71
Left otorrhea, profuse,	0
Left otorrhea, offensive,	0
BREATHING	
Slight impairment,	113
Serious impairment,	9
Mouth breathing,	19
TEETH	
Unclean,	193
Decayed,	531
TONSILS	
Slightly enlarged,	442
Greatly enlarged,	171
Acutely inflamed,	24
ENLARGED CERVICAL GLANDS,	8
TUBERCULOSIS	
Lungs,	0
Glands,	0
Bones,	0
Joints,	0
NERVOUS DISEASE	
Chorea,	0
Epilepsy,	0
SKIN DISEASE,	5
HEAD LICE	
Nits,	32
Lice,	3
Crusted scalp,	5
DEFORMITIES	7
NUTRITION	
Fair,	184
Poor,	15
MISCELLANEOUS DEFECTS,	
No. pupils having 1 defect,	0
No. pupils having 2 defects,	201
No. pupils having 3 defects,	299
No. pupils having 4 defects,	14
No. pupils having 5 defects,	130
No. pupils having 6 defects,	48
No. pupils having 6 defects,	30
No. pupils having 7 defects,	6
No. pupils having 8 defects,	2
No. pupils having 9 defects,	0
No. pupils having 10 or more defects,	0

FORREST COUNTY.

No. schools inspected,	10
No. pupils enrolled,	311
No. pupils inspected,	275
No. pupils not defective,	5
No. pupils defective,	270
Total No. defects,	977
EYES	
Defective vision, right eye,	124
Defective vision, left eye,	119
Corneal defects, slight,	14
Corneal defects, serious,	0
Corneal defects, blindness,	0
HEARING	
Defective hearing, right ear,	26
Defective hearing, left ear,	26
Right otorrhea, slight,	2
Right otorrhea, profuse,	0
Right otorrhea, offensive,	0
Left otorrhea, slight,	1
Left otorrhea, profuse,	0
Left otorrhea, offensive,	0
BREATHING	
Slight impairment,	11
Serious impairment,	6
Mouth breathing,	29
TEETH	
Unclean,	2
Decayed,	218
TONSILS	
Slightly enlarged,	164
Greatly enlarged,	65
Acutely inflamed,	1
ENLARGED CERVICAL GLANDS,	75
TUBERCULOSIS	
Lungs,	2
Glands,	0
Bones,	0
Joints,	0
NERVOUS DISEASE	
Chorea,	0
Epilepsy,	1
SKIN DISEASE,	3
HEAD LICE	
Nits,	0
Lice,	0
Crusted scalp,	0
DEFORMITIES,	2
NUTRITION	
Fair,	72
Poor,	11
MISCELLANEOUS DEFECTS,	
No. pupils having 1 defect,	3
No. pupils having 2 defects,	20
No. pupils having 3 defects,	60
No. pupils having 4 defects,	57
No. pupils having 5 defects,	64
No. pupils having 6 defects,	32
No. pupils having 7 defects,	22
No. pupils having 8 defects,	8
No. pupils having 9 defects,	3
No. pupils having 10 or more defects,	2
No. pupils having 10 or more defects,	2

FULTON COUNTY.

No. schools inspected,	17
No. pupils enrolled,	453
No. pupils inspected,	250
No. pupils not defective,	6
No. pupils defective,	244
Total No. defects,	806
EYES	
Defective vision, right eye,	143
Defective vision, left eye,	138
Corneal defects, slight,	6
Corneal defects, serious,	1
Corneal defects, blindness,	1
HEARING	
Defective hearing, right ear,	14
Defective hearing, left ear,	16
Right otorrhea, slight,	9
Right otorrhea, profuse,	0
Right otorrhea, offensive,	0
Left otorrhea, slight,	7
Left otorrhea, profuse,	1
Left otorrhea, offensive,	0
BREATHING	
Slight impairment,	17
Serious impairment,	0
Mouth breathing,	0
TEETH	
Unclean,	52
Decayed,	138
TONSILS	
Slightly enlarged,	72
Greatly enlarged,	67
Acutely inflamed,	15
ENLARGED CERVICAL GLANDS,	
	39
TUBERCULOSIS	
Lungs,	2
Glands,	0
Bones,	0
Joints,	0
NERVOUS DISEASE	
Chorea,	6
Epilepsy,	0
SKIN DISEASE,	
	7
HEAD LICE	
Nits,	0
Lice,	0
Crusted scalp,	4
DEFORMITIES,	
	0
NUTRITION	
Fair,	50
Poor,	0
MISCELLANEOUS DEFECTS,	
	1
No. pupils having 1 defect,	26
No. pupils having 2 defects,	49
No. pupils having 3 defects,	69
No. pupils having 4 defects,	52
No. pupils having 5 defects,	29
No. pupils having 6 defects,	13
No. pupils having 7 defects,	4
No. pupils having 8 defects,	2
No. pupils having 9 defects,	0
No. pupils having 10 or more defects,	0

FRANKLIN COUNTY.

No. schools inspected,	42
No. pupils enrolled,	1,482
No. pupils inspected,	1,017
No. pupils not defective,	98
No. pupils defective,	819
Total No. defects,	1,754
EYES	
Defective vision, right eye,	478
Defective vision, left eye,	480
Corneal defects, slight,	0
Corneal defects, serious,	0
Corneal defects, blindness,	0
HEARING	
Defective hearing, right ear,	17
Defective hearing, left ear,	16
Right otorrhea, slight,	0
Right otorrhea, profuse,	0
Right otorrhea, offensive,	0
Left otorrhea, slight,	0
Left otorrhea, profuse,	0
Left otorrhea, offensive,	0
BREATHING	
Slight impairment,	0
Serious impairment,	0
Mouth breathing,	31
TEETH	
Unclean,	92
Decayed,	401
TONSILS	
Slightly enlarged,	148
Greatly enlarged,	48
Acutely inflamed,	0
ENLARGED CERVICAL GLANDS,	37
TUBERCULOSIS	
Lungs,	0
Glands,	0
Bones,	0
Joints,	0
NERVOUS DISEASE	
Chorea,	0
Epilepsy,	0
SKIN DISEASE,	0
HEAD LICE	
Nits,	0
Lice,	0
Crusted scalp,	0
DEFORMITIES,	0
NUTRITION	
Fair,	5
Poor,	1
MISCELLANEOUS DEFECTS,	
No. pupils having 1 defect,	258
No. pupils having 2 defects,	270
No. pupils having 3 defects,	225
No. pupils having 4 defects,	51
No. pupils having 5 defects,	13
No. pupils having 6 defects,	2
No. pupils having 7 defects,	0
No. pupils having 8 defects,	0
No. pupils having 9 defects,	0
No. pupils having 10 or more defects,	0

GREENE COUNTY.

No. schools inspected,	3
No. pupils enrolled,	260
No. pupils inspected,	182
No. pupils not defective,	36
No. pupils defective,	146
Total No. defects,	352
EYES	
Defective vision, right eye,	43
Defective vision, left eye,	50
Corneal defects, slight,	0
Corneal defects, serious,	1
Corneal defects, blindness,	1
HEARING	
Defective hearing, right ear,	14
Defective hearing, left ear,	12
Right otorrhea, slight,	1
Right otorrhea, profuse,	0
Right otorrhea, offensive,	0
Left otorrhea, slight,	0
Left otorrhea, profuse,	0
Left otorrhea, offensive,	0
BREATHING	
Slight impairment,	22
Serious impairment,	3
Mouth breathing,	8
TEETH	
Unclean,	33
Decayed,	49
TONSILS	
Slightly enlarged,	73
Greatly enlarged,	16
Acutely inflamed,	0
ENLARGED CERVICAL GLANDS,	11
TUBERCULOSIS	
Glands,	0
Lungs,	0
Bones,	0
Joints,	0
NERVOUS DISEASE	
Chorea,	0
Epilepsy,	0
SKIN DISEASE,	0
HEAD LICE	
Nits,	0
Lice,	0
Crusted scalp,	1
DEFORMITIES,	1
NUTRITION	
Fair,	12
Poor,	1
MISCELLANEOUS DEFECTS,	
No. pupils having 1 defect,	0
No. pupils having 2 defects,	52
No. pupils having 3 defects,	35
No. pupils having 4 defects,	26
No. pupils having 5 defects,	20
No. pupils having 6 defects,	7
No. pupils having 7 defects,	5
No. pupils having 8 defects,	1
No. pupils having 9 defects,	0
No. pupils having 10 or more defects,	0

HUNTINGDON COUNTY.

No. schools inspected,	45
No. pupils enrolled,	1,187
No. pupils inspected,	927
No. pupils not defective,	285
No. pupils defective,	642
Total No. defects,	1,423
EYES	
Defective vision, right eye,	160
Defective vision, left eye,	161
Corneal defects, slight,	22
Corneal defects, serious,	6
Corneal defects, blindness,	3
HEARING	
Defective hearing, right ear,	53
Defective hearing, left ear,	59
Right otorrhea, slight,	34
Right otorrhea, profuse,	2
Right otorrhea, offensive,	0
Left otorrhea, slight,	45
Left otorrhea, profuse,	2
Left otorrhea, offensive,	5
BREATHING	
Slight impairment,	45
Serious impairment,	13
Mouth breathing,	8
TEETH	
Unclean,	236
Decayed,	135
TONSILS	
Slightly enlarged,	272
Greatly enlarged,	73
Acutely inflamed,	9
ENLARGED CERVICAL GLANDS,	36
TUBERCULOSIS	
Lungs,	0
Glands,	0
Bones,	0
Joints,	0
NERVOUS DISEASE	
Chorea,	0
Epilepsy,	0
SKIN DISEASE,	2
HEAD LICE	
Nits,	0
Lice,	0
Crusted scalp,	0
DEFORMITIES,	3
NUTRITION	
Fair,	36
Poor,	3
MISCELLANEOUS DEFECTS,	0
No. pupils having 1 defect,	239
No. pupils having 2 defects,	200
No. pupils having 3 defects,	100
No. pupils having 4 defects,	59
No. pupils having 5 defects,	26
No. pupils having 6 defects,	12
No. pupils having 7 defects,	4
No. pupils having 8 defects,	1
No. pupils having 9 defects,	0
No. pupils having 10 or more defects,	1

INDIANA COUNTY.

No. schools inspected,	36
No. pupils enrolled,	1,681
No. pupils inspected,	1,271
No. pupils not defective,	330
No. pupils defective,	941
Total No. defects,	2,087
EYES	
Defective vision, right eye,	336
Defective vision, left eye,	336
Corneal defects, slight,	2
Corneal defects, serious,	1
Corneal defects, blindness,	3
HEARING	
Defective hearing, right ear,	13
Defective hearing, left ear,	19
Right otorrhea, slight,	8
Right otorrhea, profuse,	1
Right otorrhea, offensive,	0
Left otorrhea, slight,	8
Left otorrhea, profuse,	0
Left otorrhea, offensive,	0
BREATHING	
Slight impairment,	66
Serious impairment,	13
Mouth breathing,	26
TEETH	
Unclean,	105
Decayed,	288
TONSILS	
Slightly enlarged,	299
Greatly enlarged,	116
Acutely inflamed,	11
ENLARGED CERVICAL GLANDS,	183
TUBERCULOSIS	
Lungs,	1
Glands,	1
Bones,	0
Joints,	0
NERVOUS DISEASE	
Chorea,	3
Epilepsy,	0
SKIN DISEASE,	2
HEAD LICE	
Nits,	6
Lice,	0
Crusted scalp,	0
DEFORMITIES,	3
NUTRITION	
Fair,	209
Poor,	26
MISCELLANEOUS DEFECTS,	
No. pupils having 1 defect,	2
No. pupils having 2 defects,	305
No. pupils having 3 defects,	311
No. pupils having 4 defects,	198
No. pupils having 5 defects,	90
No. pupils having 6 defects,	21
No. pupils having 7 defects,	12
No. pupils having 8 defects,	3
No. pupils having 9 defects,	1
No. pupils having 10 or more defects,	0

JUNIATA COUNTY.

No. schools inspected,	33		
No. pupils enrolled,	1,226		
No. pupils inspected,	959		
No. pupils not defective,	274		
No. pupils defective,	685		
Total No. defects,	1,654		
EYES			
Defective vision, right eye,	246		
Defective vision, left eye,	264		
Corneal defects, slight,	6		
Corneal defects, serious,	3		
Corneal defects, blindness,	1		
HEARING			
Defective hearing, right ear,	36		
Defective hearing, left ear,	44		
Right otorrhea, slight,	1		
Right otorrhea, profuse,	0		
Right otorrhea, offensive,	0		
Left otorrhea, slight,	4		
Left otorrhea, profuse,	0		
Left otorrhea, offensive,	1		
BREATHING			
Slight impairment,	28		
Serious impairment,	3		
Mouth breathing,	1		
TEETH			
Unclean,	169		
Decayed,	253		
TONSILS			
Slightly enlarged,	306		
Greatly enlarged,	107		
Acutely inflamed,	9		
ENLARGED CERVICAL GLANDS,		30	
TUBERCULOSIS			
Lungs,	3		
Glands,	1		
Bones,	0		
Joints,	1		
NERVOUS DISEASE			
Chorea,	2		
Epilepsy,	0		
SKIN DISEASE,			1
HEAD LICE			
Nits,	2		
Lice,	0		
Crusted scalp,	2		
DEFORMITIES,			6
NUTRITION			
Fair,	124		
Poor,	1		
MISCELLANEOUS DEFECTS,			0
No. pupils having 1 defect,	231		
No. pupils having 2 defects,	191		
No. pupils having 3 defects,	109		
No. pupils having 4 defects,	88		
No. pupils having 5 defects,	41		
No. pupils having 6 defects,	19		
No. pupils having 7 defects,	5		
No. pupils having 8 defects,	1		
No. pupils having 9 defects,	0		
No. pupils having 10 or more defects,	0		

JEFFERSON COUNTY.

No. schools inspected,	23
No. pupils enrolled,	909
No. pupils inspected,	833
No. pupils not defective,	238
No. pupils defective,	595
Total No. defects,	1,218

EYES

Defective vision, right eye,	179
Defective vision, left eye,	189
Corneal defects, slight,	7
Corneal defects, serious,	1
Corneal defects, blindness,	0

HEARING

Defective hearing, right ear,	20
Defective hearing, left ear,	21
Right otorrhea, slight,	4
Right otorrhea, profuse,	0
Right otorrhea, offensive,	0
Left otorrhea, slight,	2
Left otorrhea, profuse,	0
Left otorrhea, offensive,	1

BREATHING

Slight impairment,	35
Serious impairment,	4
Mouth breathing,	0

TEETH

Unclean,	59
Decayed,	220

TONSILS

Slightly enlarged,	236
Greatly enlarged,	63
Acutely inflamed,	16

ENLARGED CERVICAL GLANDS,	15
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TUBERCULOSIS

Lungs,	1
Glands,	3
Bones,	0
Joints,	0

NERVOUS DISEASE

Chorea,	2
Epilepsy,	0

SKIN DISEASE,	3
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HEAD LICE

Nits,	5
Lice,	5
Crusted scalp,	0

DEFORMITIES,	2
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NUTRITION

Fair,	94
Poor,	4

MISCELLANEOUS DEFECTS,	2
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No. pupils having 1 defect,	239
No. pupils having 2 defects,	192
No. pupils having 3 defects,	103
No. pupils having 4 defects,	36
No. pupils having 5 defects,	17
No. pupils having 6 defects,	3
No. pupils having 7 defects,	1
No. pupils having 8 defects,	4
No. pupils having 9 defects,	0
No. pupils having 10 or more defects,	0

LACKAWANNA COUNTY.

No. schools inspected,	38
No. pupils enrolled,	3,699
No. pupils inspected,	2,933
No. pupils not defective,	777
No. pupils defective,	1,956
Total No. defects,	3,808
EYES	
Defective vision, right eye,	432
Defective vision, left eye,	433
Corneal defects, slight,	4
Corneal defects, serious,	3
Corneal defects, blindness,	5
HEARING	
Defective, right ear,	23
Defective hearing, left ear,	32
Right otorrhea, slight,	11
Right otorrhea, profuse,	1
Right otorrhea, offensive,	1
Left otorrhea, slight,	10
Left otorrhea, profuse,	2
Left otorrhea, offensive,	5
BREATHING	
Slight impairment,	249
Serious impairment,	26
Mouth breathing,	13
TEETH	
Unclean,	342
Decayed,	931
TONSILS	
Slightly enlarged,	553
Greatly enlarged,	129
Acutely inflamed,	35
ENLARGED CERVICAL GLANDS,	96
TUBERCULOSIS	
Lungs,	2
Glands,	7
Bones,	0
Joints,	1
NERVOUS DISEASE	
Chorea,	1
Epilepsy,	0
SKIN DISEASE,	9
HEAD LICE	
Nits,	100
Lice,	9
Crusted scalp,	5
DEFORMITIES,	7
NUTRITION	
Fair,	324
Poor,	9
MISCELLANEOUS DEFECTS,	
No. pupils having 1 defect,	935
No. pupils having 2 defects,	541
No. pupils having 3 defects,	260
No. pupils having 4 defects,	132
No. pupils having 5 defects,	57
No. pupils having 6 defects,	22
No. pupils having 7 defects,	6
No. pupils having 8 defects,	3
No. pupils having 9 defects,	0
No. pupils having 10 or more defects,	0

LANCASTER COUNTY.

No. schools inspected,	113
No. pupils enrolled,	4,983
No. pupils inspected,	3,544
No. pupils not defective,	1,752
No. pupils defective,	1,792
Total No. defects,	2,906
EYES	
Defective vision, right eye,	311
Defective vision, left eye,	302
Corneal defects, slight,	15
Corneal defects, serious,	3
Corneal defects, blindness,	0
HEARING	
Defective hearing, right ear,	35
Defective hearing, left ear,	43
Right otorrhea, slight,	5
Right otorrhea, profuse,	0
Right otorrhea, offensive,	1
Left otorrhea, slight,	3
Left otorrhea, profuse,	0
Left otorrhea, offensive,	0
BREATHING	
Slight impairment,	107
Serious impairment,	18
Mouth breathing,	39
TEETH	
Unclean,	271
Decayed,	875
TONSILS	
Slightly enlarged,	420
Greatly enlarged,	205
Acutely inflamed,	32
ENLARGED CERVICAL GLANDS,	
	55
TUBERCULOSIS	
Lungs,	1
Glands,	29
Bones,	0
Joints,	0
NERVOUS DISEASE	
Chorea,	15
Epilepsy,	0
SKIN DISEASE,	
	7
HEAD LICE	
Nits,	1
Lice,	0
Crusted scalp,	6
DEFORMITIES,	
	12
NUTRITION	
Fair,	89
Poor,	4
MISCELLANEOUS DEFECTS,	
	2
No. pupils having 1 defect,	1,059
No. pupils having 2 defects,	468
No. pupils having 3 defects,	175
No. pupils having 4 defects,	71
No. pupils having 5 defects,	12
No. pupils having 6 defects,	7
No. pupils having 7 defects,	0
No. pupils having 8 defects,	0
No. pupils having 9 defects,	0
No. pupils having 10 or more defects,	0

LAWRENCE COUNTY.

No. schools inspected,	72
No. pupils enrolled,	2,340
No. pupils inspected,	2,668
No. pupils not defective,	675
No. pupils defective,	1,993
Total No. defects,	4,576
EYES	
Defective vision, right eye,	674
Defective vision, left eye,	720
Corneal defects, slight,	58
Corneal defects, serious,	0
Corneal defects, blindness,	8
HEARING	
Defective hearing, right ear,	74
Defective hearing, left ear,	75
Right otorrhea, slight,	76
Right otorrhea, profuse,	1
Right otorrhea, offensive,	0
Left otorrhea, slight,	73
Left otorrhea, profuse,	4
Left otorrhea, offensive,	0
BREATHING	
Slight impairment,	145
Serious impairment,	28
Mouth breathing,	11
TEETH	
Unclean,	569
Decayed,	497
TONSILS	
Slightly enlarged,	731
Greatly enlarged,	328
Acutely inflamed,	22
ENLARGED CERVICAL GLANDS,	212
TUBERCULOSIS	
Lungs,	7
Glands,	1
Bones,	0
Joints,	1
NERVOUS DISEASE	
Chorea,	1
Epilepsy,	1
SKIN DISEASE,	5
HEAD LICE	
Nits,	9
Lice,	16
Crusted scalp,	1
DEFORMITIES,	6
NUTRITION	
Fair,	217
Poor,	7
MISCELLANEOUS DEFECTS,	
No. pupils having 1 defect,	3
No. pupils having 2 defects,	695
No. pupils having 3 defects,	581
No. pupils having 4 defects,	377
No. pupils having 5 defects,	203
No. pupils having 6 defects,	85
No. pupils having 7 defects,	24
No. pupils having 8 defects,	8
No. pupils having 9 defects,	3
No. pupils having 10 or more defects,	6
	1

LEBANON COUNTY.

No. schools inspected,	18
No. pupils enrolled,	937
No. pupils inspected,	875
No. pupils not defective,	141
No. pupils defective,	734
Total No. defects,	1,501
EYES	
Defective vision, right eye,	183
Defective vision, left eye,	180
Corneal defects, slight,	3
Corneal defects, serious,	0
Corneal defects, blindness,	0
HEARING	
Defective hearing, right ear,	11
Defective hearing, left ear,	11
Right otorrhea, slight,	5
Right otorrhea, profuse,	1
Right otorrhea, offensive,	0
Left otorrhea, slight,	4
Left otorrhea, profuse,	3
Left otorrhea, offensive,	0
BREATHING	
Slight impairment,	70
Serious impairment,	6
Mouth breathing,	2
TEETH	
Unclean,	107
Decayed,	489
TONSILS	
Slightly enlarged,	181
Greatly enlarged,	13
Acutely inflamed,	1
ENLARGED CERVICAL GLANDS,	
	43
TUBERCULOSIS	
Lungs,	0
Glands,	0
Bones,	0
Joints,	0
NERVOUS DISEASE	
Chorea,	3
Epilepsy,	0
SKIN DISEASE,	
	0
HEAD LICE	
Nits,	0
Lice,	0
Crusted scalp,	0
DEFORMITIES,	
	4
NUTRITION	
Fair,	176
Poor,	5
MISCELLANEOUS DEFECTS,	
	0
No. pupils having 1 defect,	320
No. pupils having 2 defects,	122
No. pupils having 3 defects,	137
No. pupils having 4 defects,	51
No. pupils having 5 defects,	19
No. pupils having 6 defects,	9
No. pupils having 7 defects,	3
No. pupils having 8 defects,	0
No. pupils having 9 defects,	0
No. pupils having 10 or more defects,	0

LEHIGH COUNTY.

No. schools inspected,	73
No. pupils enrolled,	3,487
No. pupils inspected,	2,858
No. pupils not defective,	512
No. pupils defective,	2,346
Total No defects,	6,754
EYES	
Defective vision, right eye,	882
Defective vision, left eye,	894
Corneal defects, slight,	23
Corneal defects, serious,	6
Corneal defects, blindness,	5
HEARING	
Defective hearing, right ear,	103
Defective hearing, left ear,	107
Right otorrhea, slight,	29
Right otorrhea, profuse,	5
Right otorrhea, offensive,	1
Left otorrhea, slight,	45
Left otorrhea, profuse,	4
Left otorrhea, offensive,	0
BREATHING	
Slight impairment,	172
Serious impairment,	27
Mouth breathing,	21
TEETH	
Unclean,	599
Decayed,	1,091
TONSILS	
Slightly enlarged,	658
Greatly enlarged,	250
Acutely inflamed,	63
ENLARGED CERVICAL GLANDS,	129
TUBERCULOSIS	
Lungs,	2
Glands,	1
Bones,	0
Joints,	0
NERVOUS DISEASE	
Chorea,	4
Epilepsy,	0
SKIN DISEASE,	11
HEAD LICE	
Nits,	24
Lice,	14
Crusted scalp,	1
DEFORMITIES,	2
NUTRITION	
Fair,	536
Poor,	41
MISCELLANEOUS DEFECTS,	
No. pupils having 1 defect,	708
No. pupils having 2 defects,	613
No. pupils having 3 defects,	567
No. pupils having 4 defects,	272
No. pupils having 5 defects,	121
No. pupils having 6 defects,	35
No. pupils having 7 defects,	25
No. pupils having 8 defects,	4
No. pupils having 9 defects,	1
No. pupils having 10 or more defects,	0

LUZERNE COUNTY.

No. schools inspected,	44
No. pupils enrolled,	4,265
No. pupils inspected,	3,472
No. pupils not defective,	1,231
No. pupils defective,	2,241
Total No. defects,	5,260
EYES	
Defective vision, right eye,	537
Defective vision, left eye,	533
Corneal defects, slight,	3
Corneal defects, serious,	3
Corneal defects, blindness,	3
HEARING	
Defective hearing, right ear,	114
Defective hearing, left ear,	122
Right otorrhea, slight,	10
Right otorrhea, profuse,	2
Right otorrhea, offensive,	1
Left otorrhea, slight,	8
Left otorrhea, profuse,	1
Left otorrhea, offensive,	0
BREATHING	
Slight impairment,	421
Serious impairment,	17
Mouth breathing,	16
TEETH	
Unclean,	394
Decayed,	1,032
TONSILS	
Slightly enlarged,	869
Greatly enlarged,	247
Acutely inflamed,	13
ENLARGED CERVICAL GLANDS,	436
TUBERCULOSIS	
Lungs,	3
Glands,	2
Bones,	0
Joints,	2
NERVOUS DISEASE	
Chorea,	4
Epilepsy,	0
SKIN DISEASE,	12
HEAD LICE	
Nits,	88
Lice,	30
Crusted scalp,	2
DEFORMITIES,	3
NUTRITION	
Fair,	320
Poor,	12
MISCELLANEOUS DEFECTS,	
No. pupils having 1 defect,	815
No. pupils having 2 defects,	596
No. pupils having 3 defects,	358
No. pupils having 4 defects,	257
No. pupils having 5 defects,	161
No. pupils having 6 defects,	38
No. pupils having 7 defects,	11
No. pupils having 8 defects,	4
No. pupils having 9 defects,	1
No. pupils having 10 or more defects,	0

LYCOMING COUNTY.

No. schools inspected,	117
No. pupils enrolled,	4,959
No. pupils inspected,	4,263
No. pupils not defective,	
No. pupils defective,	3,271
Total No. defects,	8,557
EYES	
Defective vision, right eye,	1,292
Defective vision, left eye,	1,305
Corneal defects, slight,	65
Corneal defects, serious,	3
Corneal defects, blindness,	6
HEARING	
Defective hearing, right ear,	288
Defective hearing, left ear,	293
Right otorrhea, slight,	24
Right otorrhea, profuse,	1
Right otorrhea, offensive,	1
Left otorrhea, slight,	24
Left otorrhea, profuse,	2
Left otorrhea, offensive,	2
BREATHING	
Slight impairment,	238
Serious impairment,	42
Mouth breathing,	17
TEETH	
Unclean,	414
Decayed,	1,753
TONSILS	
Slightly enlarged,	1,089
Greatly enlarged,	296
Acutely inflamed,	63
ENLARGED CERVICAL GLANDS,	
	646
TUBERCULOSIS	
Lungs,	1
Glands,	2
Bones,	0
Joints,	0
NERVOUS DISEASE	
Chorea,	3
Epilepsy,	1
SKIN DISEASE,	
	12
HEAD LICE	
Nits,	1
Lice,	3
Crusted scalp,	3
DEFORMITIES,	
	12
NUTRITION	
Fair,	612
Poor,	41
MISCELLANEOUS DEFECTS,	
	2
No. pupils having 1 defect,	983
No. pupils having 2 defects,	940
No. pupils having 3 defects,	535
No. pupils having 4 defects,	380
No. pupils having 5 defects,	224
No. pupils having 6 defects,	150
No. pupils having 7 defects,	56
No. pupils having 8 defects,	15
No. pupils having 9 defects,	3
No. pupils having 10 or more defects,	1

McKEAN COUNTY.

No. schools inspected,	9
No. pupils enrolled,	808
No. pupils inspected,	718
No. pupils not defective,	121
No. pupils defective,	592
Total No. defects,	1,233
EYES	
Defective vision, right eye,	320
Defective vision, left eye,	359
Corneal defects, slight,	0
Corneal defects, serious,	0
Corneal defects, blindness,	1
HEARING	
Defective hearing, right ear,	7
Defective hearing, left ear,	6
Right otorrhea, slight,	2
Right otorrhea, profuse,	0
Right otorrhea, offensive,	0
Left otorrhea, slight,	1
Left otorrhea, offensive,	0
Left otorrhea, profuse,	0
BREATHING	
Slight impairment,	1
Serious impairment,	0
Mouth breathing,	2
TEETH	
Unclean,	33
Decayed,	325
TONSILS	
Slightly enlarged,	131
Greatly enlarged,	33
Acutely inflamed,	2
ENLARGED CERVICAL GLANDS,	0
TUBERCULOSIS	
Lungs,	0
Glands,	1
Bones,	0
Joints,	0
NERVOUS DISEASE	
Chorea,	0
Epilepsy,	0
SKIN DISEASE,	5
HEAD LICE	
Nits,	1
Lice,	0
Crusted scalp,	0
DEFORMITIES,	2
NUTRITION	
Fair,	4
Poor,	2
MISCELLANEOUS DEFECTS,	
No. pupils having 1 defect,	0
No. pupils having 2 defects,	198
No. pupils having 3 defects,	196
No. pupils having 4 defects,	151
No. pupils having 5 defects,	42
No. pupils having 6 defects,	3
No. pupils having 7 defects,	2
No. pupils having 8 defects,	0
No. pupils having 9 defects,	0
No. pupils having 10 or more defects,	0

MERCER COUNTY.

No. schools inspected,	74
No. pupils enrolled,	3,377
No. pupils inspected,	2,924
No. pupils not defective,	614
No. pupils defective,	2,310
Total No. defects,	5,101
EYES	
Defective vision, right eye,	755
Defective vision, left eye,	759
Corneal defects, slight,	37
Corneal defects, serious,	4
Corneal defects, blindness,	8
HEARING	
Defective hearing, right ear,	155
Defective hearing left ear,	150
Right otorrhea, slight,	15
Right otorrhea, profuse,	1
Right otorrhea, offensive,	6
Left otorrhea, slight,	23
Left otorrhea, profuse,	1
Left otorrhea, offensive,	2
BREATHING	
Slight impairment,	158
Serious impairment,	34
Mouth breathing,	74
TEETH	
Unclean,	291
Decayed,	1,242
TONSILS	
Slightly enlarged,	741
Greatly enlarged,	183
Acutely inflamed,	42
ENLARGED CERVICAL GLANDS,	
	199
TUBERCULOSIS	
Lungs,	1
Glands,	0
Bones,	1
Joints,	1
NERVOUS DISEASE	
Chorea,	7
Epilepsy,	1
SKIN DISEASE,	
	5
HEAD LICE	
Nits,	6
Lice,	1
Crusted scalp,	0
DEFORMITIES,	
	6
NUTRITION	
Fair,	174
Poor,	17
MISCELLANEOUS DEFECTS,	
	1
No. pupils having 1 defect,	801
No. pupils having 2 defects,	764
No. pupils having 3 defects,	404
No. pupils having 4 defects,	215
No. pupils having 5 defects,	80
No. pupils having 6 defects,	30
No. pupils having 7 defects,	10
No. pupils having 8 defects,	4
No. pupils having 9 defects,	2
No. pupils having 10 or more defects,	0

MIFFLIN COUNTY.

No. schools inspected,	15
No. pupils enrolled,	487
No. pupils inspected,	437
No. pupils not defective,	130
No. pupils defective,	307
Total No. defects,	679
EYES	
Defective vision, right eye,	125
Defective vision, left eye,	121
Corneal defects, slight,	0
Corneal defects, serious,	0
Corneal defects, blindness,	0
HEARING	
Defective hearing, right ear,	18
Defective hearing, left ear,	12
Right otorrhea, slight,	6
Right otorrhea, profuse,	0
Right otorrhea, offensive,	0
Left otorrhea, slight,	2
Left otorrhea, profuse,	0
Left otorrhea, offensive,	0
BREATHING	
Slight impairment,	49
Serious impairment,	1
Mouth breathing,	2
TEETH	
Unclean,	74
Decayed,	49
TONSILS	
Slightly enlarged,	123
Greatly enlarged,	46
Acutely inflamed,	4
ENLARGED CERVICAL GLANDS,	38
TUBERCULOSIS	
Lungs,	7
Glands,	0
Bones,	1
Joints,	1
NERVOUS DISEASE	
Chorea,	1
Epilepsy,	6
SKIN DISEASE,	6
Nits,	0
Lice,	0
Crusted,	0
DEFORMITIES,	0
NUTRITION	
Fair,	4
Poor,	1
MISCELLANEOUS DEFECTS,	1
No. pupils having 1 defect,	95
No. pupils having 2 defects,	108
No. pupils having 3 defects,	69
No. pupils having 4 defects,	22
No. pupils having 5 defects,	9
No. pupils having 6 defects,	2
No. pupils having 7 defects,	1
No. pupils having 8 defects,	0
No. pupils having 9 defects,	1
No. pupils having 10 or more defects,	0

MONROE COUNTY.

No. schools inspected,	46
No. pupils enrolled,	881
No. pupils inspected,	730
No. pupils not defective,	154
No. pupils defective,	576
Total No. defects,	1,125
EYES	
Defective vision, right eye,	208
Defective vision, left eye,	204
Corneal defects, slight,	0
Corneal defects, serious,	0
Corneal defects, blindness,	0
HEARING	
Defective hearing, right ear,	14
Defective hearing, left ear,	15
Right otorrhea, slight,	2
Right otorrhea, profuse,	0
Right otorrhea, offensive,	0
Left otorrhea, slight,	2
Left otorrhea, profuse,	0
Left otorrhea, offensive,	0
BREATHING	
Slight impairment,	30
Serious impairment,	1
Mouth breathing,	5
TEETH	
Unclean,	81
Decayed,	288
TONSILS	
Slightly enlarged,	183
Greatly enlarged,	19
Acutely inflamed,	8
ENLARGED CERVICAL GLANDS,	
	21
TUBERCULOSIS	
Lungs,	1
Glands,	0
Bones,	0
Joints,	0
NERVOUS DISEASE	
Chorea,	0
Epilepsy,	0
SKIN DISEASE,	
	1
HEAD LICE	
Nits,	0
Lice,	0
Crusted scalp,	2
DEFORMITIES,	
	4
NUTRITION	
Fair,	34
Poor,	1
MISCELLANEOUS DEFECTS,	
	1
No. pupils having 1 defect,	274
No. pupils having 2 defects,	136
No. pupils having 3 defects,	105
No. pupils having 4 defects,	45
No. pupils having 5 defects,	12
No. pupils having 6 defects,	4
No. pupils having 7 defects,	0
No. pupils having 8 defects,	0
No. pupils having 9 defects,	0
No. pupils having 10 or more defects,	0

MONTGOMERY COUNTY.

No. schools inspected,	52
No. pupils enrolled,	4,303
No. pupils inspected,	4,086
No. pupils not defective,	1,021
No. pupils defective,	3,065
Total No. defects,	7,040
EYES	
Defective vision, right eye,	860
Defective vision, left eye,	920
Corneal defects, slight,	15
Corneal defects, serious,	3
Corneal defects, blindness,	5
HEARING	
Defective hearing, right ear,	118
Defective hearing, left ear,	118
Right otorrhea, slight,	16
Right otorrhea, profuse,	1
Right otorrhea, offensive,	0
Left otorrhea, slight,	16
Left otorrhea, profuse,	1
Left otorrhea, offensive,	3
BREATHING	
Slight impairment,	463
Serious impairment,	37
Mouth breathing,	158
TEETH	
Unclean,	599
Decayed,	1,077
TONSILS	
Slightly enlarged,	1,140
Greatly enlarged,	426
Acutely inflamed,	9
ENLARGED CERVICAL GLANDS	
	718
TUBERCULOSIS	
Lungs,	1
Glands,	1
Bones,	0
Joints,	2
NERVOUS DISEASE	
Chorea,	7
Epilepsy,	2
SKIN DISEASE,	
	21
HEAD LICE	
Nits,	75
Lice,	4
Crusted scalp,	5
DEFORMITIES,	
	17
NUTRITION	
Fair,	233
Poor,	8
MISCELLANEOUS DEFECTS,	
	1
No. pupils having 1 defect,	941
No. pupils having 2 defects,	1,002
No. pupils having 3 defects,	639
No. pupils having 4 defects,	298
No. pupils having 5 defects,	130
No. pupils having 6 defects,	50
No. pupils having 7 defects,	4
No. pupils having 8 defects,	1
No. pupils having 9 defects,	
No. pupils having 10 or more defects,	

NORTHUMBERLAND COUNTY.

No. schools inspected,	32
No. pupils enrolled,	1,986
No. pupils inspected,	1,721
No. pupils not defective,	445
No. pupils defective,	1,276
Total No. defects,	3,116
EYES	
Defective vision, right eye,	459
Defective vision, left eye,	465
Corneal defects, slight,	0
Corneal defects, serious,	2
Corneal defects, blindness,	0
HEARING	
Defective hearing, right ear,	50
Defective hearing, left ear,	48
Right otorrhea, slight,	5
Right otorrhea, profuse,	1
Right otorrhea, offensive,	3
Left otorrhea, slight,	4
Left otorrhea, profuse,	1
Left otorrhea, offensive,	1
BREATHING	
Slight impairment,	242
Serious impairment,	44
Mouth breathing,	30
TEETH	
Unclean,	402
Decayed,	395
TONSILS	
Slightly enlarged,	390
Greatly enlarged,	211
Acutely inflamed,	21
ENLARGED CERVICAL GLANDS,	
	78
TUBERCULOSIS	
Lungs,	9
Glands,	0
Bones,	0
Joints,	0
NERVOUS DISEASE	
Chorea,	1
Epilepsy,	1
SKIN DISEASE,	
	1
HEAD LICE	
Nits,	2
Lice,	1
Crusted scalp,	1
DEFORMITIES,	
	2
NUTRITION	
Fair,	243
Poor,	3
MISCELLANEOUS DEFECTS,	
	0
No. pupils having 1 defect,	423
No. pupils having 2 defects,	313
No. pupils having 3 defects,	264
No. pupils having 4 defects,	159
No. pupils having 5 defects,	79
No. pupils having 6 defects,	27
No. pupils having 7 defects,	7
No. pupils having 8 defects,	3
No. pupils having 9 defects,	1
No. pupils having 10 or more defects,	0

NORTHAMPTON COUNTY.

No. schools inspected,	44
No. pupils enrolled,	2,708
No. pupils inspected,	2,309
No. pupils not defective,	361
No. pupils defective,	1,948
Total No. defects,	4,783
EYES	
Defective vision, right eye,	348
Defective vision, left eye,	355
Corneal defects, slight,	7
Corneal defects, serious,	1
Corneal defects blindness,	4
HEARING	
Defective hearing, right ear,	77
Defective hearing, left ear,	72
Right otorrhea, slight,	25
Right otorrhea, profuse,	0
Right otorrhea, offensive,	0
Left otorrhea, slight,	19
Left otorrhea, profuse,	2
Left otorrhea, offensive,	0
BREATHING	
Slight impairment,	417
Serious impairment,	37
Mouth breathing,	22
TEETH	
Unclean,	525
Decayed,	896
TONSILS	
Slightly enlarged,	653
Greatly enlarged,	165
Acutely inflamed,	11
ENLARGED CERVICAL GLANDS,	708
TUBERCULOSIS	
Lungs,	15
Glands,	3
Bones,	0
Joints,	1
NERVOUS DISEASE	
Chorea,	3
Epilepsy,	3
SKIN DISEASE,	13
HEAD LICE	
Nits,	67
Lice,	2
Crusted scalp,	3
DEFORMITIES,	23
NUTRITION	
Fair,	295
Poor,	11
MISCELLANEOUS DEFECTS,	
No. pupils having 1 defect,	0
No. pupils having 2 defects,	601
No. pupils having 3 defects,	529
No. pupils having 3 defects,	398
No. pupils having 4 defects,	265
No. pupils having 5 defects,	86
No. pupils having 6 defects,	50
No. pupils having 7 defects,	13
No. pupils having 8 defects,	5
No. pupils having 9 defects,	1
No. pupils having 10 or more defects,	

PERRY COUNTY.

No. schools inspected,	25
No. pupils enrolled,	683
No. pupils inspected,	603
No. pupils not defective,	125
No. pupils defective,	478
Total No. defects,	947
EYES	
Defective vision, right eye,	192
Defective vision, left eye,	200
Corneal defects, slight,	0
Corneal defects, serious,	0
Corneal defects blindness,	2
HEARING	
Defective hearing, right ear,	19
Defective hearing, left ear,	16
Right otorrhea, slight,	0
Right otorrhea, profuse,	0
Right otorrhea, offensive,	0
Left otorrhea, slight,	2
Left otorrhea, profuse,	0
Left otorrhea, offensive,	0
BREATHING	
Slight impairment,	20
Serious impairment,	3
Mouth breathing,	1
TEETH	
Unclean,	56
Decayed,	235
TONSILS	
Slightly enlarged,	111
Greatly enlarged,	24
Acutely inflamed,	3
ENLARGED CERVICAL GLANDS,	
	24
TUBERCULOSIS	
Lungs,	0
Glands,	1
Bones,	0
Joints,	1
NERVOUS DISEASE	
Chorea,	0
Epilepsy,	0
SKIN DISEASE,	
	0
HEAD LICE	
Nits,	0
Lice,	0
Crusted scalp,	0
DEFORMITIES,	
	1
NUTRITION	
Fair,	35
Poor,	0
MISCELLANEOUS DEFECTS,	
	1
No. pupils having 1 defect,	185
No. pupils having 2 defects,	183
No. pupils having 3 defects,	52
No. pupils having 4 defects,	37
No. pupils having 5 defects,	6
No. pupils having 6 defects,	3
No. pupils having 7 defects,	2
No. pupils having 8 defects,	0
No. pupils having 9 defects,	0
No. pupils having 10 or more defects,	0

PIKE COUNTY.

No. schools inspected,	9
No. pupils enrolled,	184
No. pupils inspected,	147
No. pupils not defective,	66
No. pupils defective,	81
Total No. defects,	150
EYES	
Defective vision, right eye,	24
Defective vision, left eye,	29
Corneal defects, slight,	0
Corneal defects, serious,	0
Corneal defects, blindness,	0
HEARING	
Defective hearing, right ear,	10
Defective hearing, left ear,	9
Right otorrhea, slight,	0
Right otorrhea, profuse,	0
Right otorrhea, offensive,	0
Left otorrhea, slight,	0
Left otorrhea, profuse,	0
Left otorrhea, offensive,	0
BREATHING	
Slight impairment,	3
Serious impairment,	0
Mouth breathing,	1
TEETH	
Unclean,	3
Decayed,	51
TONSILS	
Slightly enlarged,	10
Greatly enlarged,	3
Acutely inflamed,	6
ENLARGED CERVICAL GLANDS,	
	0
TUBERCULOSIS	
Lungs,	0
Glands,	0
Bones,	0
Joints,	0
NERVOUS DISEASE	
Chorea,	0
Epilepsy,	0
SKIN DISEASE,	
	0
HEAD LICE	
Nits,	0
Lice,	0
Crusted scalp,	0
DEFORMITIES,	
	0
NUTRITION	
Fair,	1
Poor,	0
MISCELLANEOUS DEFECTS,	
	0
No. pupils having 1 defect,	38
No. pupils having 2 defects,	25
No. pupils having 3 defects,	12
No. pupils having 4 defects,	4
No. pupils having 5 defects,	2
No. pupils having 6 defects,	0
No. pupils having 7 defects,	0
No. pupils having 8 defects,	0
No. pupils having 9 defects,	0
No. pupils having 10 or more defects,	0

POTTER COUNTY.

No. schools inspected,	58
No. pupils enrolled,	2,954
No. pupils inspected,	2,595
No. pupils not defective,	652
No. pupils defective,	1,943
Total No. defects,	4,193
EYES	
Defective vision, right eye,	593
Defective vision, left eye,	592
Corneal defects, slight,	13
Corneal defects, serious,	1
Corneal defects, blindness,	3
HEARING	
Defective hearing, right ear,	64
Defective hearing left, ear,	75
Right otorrhea, slight,	9
Right otorrhea, profuse,	0
Right otorrhea, offensive,	1
Left otorrhea, slight,	6
Left otorrhea, profuse,	0
Left otorrhea, offensive,	0
BREATHING	
Slight impairment,	692
Serious impairment,	6
Mouth breathing,	12
TEETH	
Unclean,	353
Decayed,	756
TONSILS	
Slightly enlarged,	551
Greatly enlarged,	156
Acutely inflamed,	84
ENLARGED CERVICAL GLANDS,	
	99
TUBERCULOSIS	
Lungs,	0
Glands,	0
Bones,	1
Joints,	1
NERVOUS DISEASE	
Chorea,	1
Epilepsy,	0
SKIN DISEASE,	
	4
HEAD LICE	
Nits,	14
Lice,	4
Crusted scalp,	1
DEFORMITIES,	
	3
NUTRITION	
Fair,	94
Poor,	1
MISCELLANEOUS DEFECTS,	
	3
No. pupils having 1 defect,	695
No. pupils having 2 defects,	658
No. pupils having 3 defects,	333
No. pupils having 4 defects,	154
No. pupils having 5 defects,	70
No. pupils having 6 defects,	19
No. pupils having 7 defects,	9
No. pupils having 8 defects,	5
No. pupils having 9 defects,	0
No. pupils having 10 or more defects,	0

SOMERSET COUNTY.

No. schools inspected,	47
No. pupils enrolled,	2,794
No. pupils inspected,	2,198
No. pupils not defective,	701
No. pupils defective,	1,497
Total No. defects,	2,921
EYES	
Defective vision, right eye,	492
Defective vision, left eye,	479
Corneal defects, slight,	12
Corneal defects, serious,	1
Corneal defects, blindness,	1
HEARING	
Defective hearing, right ear,	61
Defective hearing, left ear,	63
Right otorrhea, slight,	2
Right otorrhea, profuse,	1
Right otorrhea, offensive,	1
Left otorrhea, slight,	3
Left otorrhea, profuse,	0
Left otorrhea, offensive,	0
BREATHING	
Slight impairment,	87
Serious impairment,	7
Mouth breathing,	6
TEETH	
Unclean,	318
Decayed,	603
TONSILS	
Slightly enlarged,	380
Greatly enlarged,	167
Acutely inflamed,	18
ENLARGED CERVICAL GLANDS,	
.....	70
TUBERCULOSIS	
Lungs,	0
Glands,	0
Bones,	3
Joints,	3
NERVOUS DISEASE	
Chorea,	2
Epilepsy,	0
SKIN DISEASE,	
.....	8
HEAD LICE	
Nits,	5
Lice,	3
Crusted scalp,	0
DEFORMITIES,	
.....	13
NUTRITION	
Fair,	107
Poor,	7
MISCELLANEOUS DEFECTS,	
.....	1
No. pupils having 1 defect,	662
No. pupils having 2 defects,	459
No. pupils having 3 defects,	231
No. pupils having 4 defects,	95
No. pupils having 5 defects,	35
No. pupils having 6 defects,	14
No. pupils having 7 defects,	0
No. pupils having 8 defects,	0
No. pupils having 9 defects,	1
No. pupils having 10 or more defects,	0

SCHUYLKILL COUNTY.

No. schools inspected,	171
No. pupils enrolled,	9,362
No. pupils inspected,	7,320
No. pupils not defective,	1,436
No. pupils defective,	5,884
Total No. defects,	12,485
EYES	
Defective vision, right eye,	2,013
Defective vision, left eye,	2,020
Corneal defects, slight,	18
Corneal defects, serious,	10
Corneal defects, blindness,	1
HEARING	
Defective hearing, right ear,	168
Defective hearing, left ear,	167
Right otorrhea, slight,	53
Right otorrhea, profuse,	7
Right otorrhea, offensive,	6
Left otorrhea, slight,	71
Left otorrhea, profuse,	1
Left otorrhea, offensive,	6
BREATHING	
Slight impairment,	552
Serious impairment,	25
Mouth breathing,	63
TEETH	
Unclean,	1,078
Decayed,	3,234
TONSILS	
Slightly enlarged,	1,539
Greatly enlarged,	567
Acutely inflamed,	36
ENLARGED CERVICAL GLANDS,	
	466
TUBERCULOSIS	
Lungs,	0
Glands,	4
Bones,	0
Joints,	2
NERVOUS DISEASE	
Chorea,	11
Epilepsy,	1
SKIN DISEASE,	
	5
HEAD LICE	
Nits,	70
Lice,	7
Crusted scalp,	12
DEFORMITIES,	
	9
Fair,	232
Poor,	19
MISCELLANEOUS DEFECTS,	
	6
No. pupils having 1 defect,	2,315
No. pupils having 2 defects,	1,681
No. pupils having 3 defects,	1,119
No. pupils having 4 defects,	506
No. pupils having 5 defects,	187
No. pupils having 6 defects,	54
No. pupils having 7 defects,	13
No. pupils having 8 defects,	6
No. pupils having 9 defects,	1
No. pupils having 10 or more defects,	2

SNYDER COUNTY.

No. schools inspected,	6
No. pupils enrolled,	428
No. pupils inspected,	326
No. pupils not defective,	78
No. pupils defective,	248
Total No. defects,	513
EYES	
Defective vision, right eye,	24
Defective vision, left eye,	16
Corneal defects, slight,	0
Corneal defects, serious,	0
Corneal defects, blindness,	0
HEARING	
Defective hearing, right ear,	8
Defective hearing, left ear,	8
Right otorrhea, slight,	0
Right otorrhea, profuse,	0
Right otorrhea, offensive,	0
Left otorrhea, slight,	0
Left otorrhea, profuse,	0
Left otorrhea, offensive,	3
BREATHING	
Slight impairment,	85
Serious impairment,	1
Mouth breathing,	15
TEETH	
Unclean,	15
Decayed,	123
TONSILS	
Slightly enlarged,	138
Greatly enlarged,	1
Acutely inflamed,	0
ENLARGED CERVICAL GLANDS,	
	29
TUBERCULOSIS	
Lungs,	0
Glands,	0
Bones,	0
Joints,	0
NERVOUS DISEASE	
Chorea,	0
Epilepsy,	0
SKIN DISEASE,	
	2
HEAD LICE	
Nits,	0
Lice,	0
Cruled scalp,	0
DEFORMITIES,	
	0
NUTRITION	
Fair,	44
Poor,	2
MISCELLANEOUS DEFECTS,	
	2
No. pupils having 1 defect,	100
No. pupils having 2 defects,	76
No. pupils having 3 defects,	43
No. pupils having 4 defects,	19
No. pupils having 5 defects,	6
No. pupils having 6 defects,	2
No. pupils having 7 defects,	2
No. pupils having 8 defects,	0
No. pupils having 9 defects,	0
No. pupils having 10 or more defects,	0

SULLIVAN COUNTY.

No. schools inspected,	34
No. pupils enrolled,	1,031
No. pupils inspected,	892
No. pupils not defective,	88
No. pupils defective,	804
Total No. defects,	2,124
EYES	
Defective vision, right eye,	263
Defective vision, left eye,	265
Corneal defects, slight,	0
Corneal defects, serious,	0
Corneal defects, blindness,	2
HEARING	
Defective hearing, right ear,	40
Defective hearing, left ear,	36
Right otorrhea, slight,	2
Right otorrhea, profuse,	0
Right otorrhea, offensive,	0
Left otorrhea, slight,	4
Left otorrhea, profuse,	1
Left otorrhea, offensive,	0
BREATHING	
Slight impairment,	128
Serious impairment,	51
Mouth breathing,	5
TEETH	
Unclean,	313
Decayed,	257
TONSILS	
Slightly enlarged,	78
Greatly enlarged,	225
Acutely inflamed,	0
ENLARGED CERVICAL GLANDS,	
	249
TUBERCULOSIS	
Lungs,	0
Glands,	0
Bones,	0
Joints,	0
NERVOUS DISEASE	
Chorea,	0
Epilepsy,	0
SKIN DISEASE,	
	0
HEAD LICE	
Nits,	19
Lice,	1
Crusted scalp,	0
DEFORMITIES,	
	2
NUTRITION	
Fair,	175
Poor,	8
MISCELLANEOUS DEFECTS,	
	0
No. pupils having 1 defect,	229
No. pupils having 2 defects,	202
No. pupils having 3 defects,	158
No. pupils having 4 defects,	112
No. pupils having 5 defects,	59
No. pupils having 6 defects,	34
No. pupils having 7 defects,	9
No. pupils having 8 defects,	1
No. pupils having 9 defects,	0
No. pupils having 10 or more defects,	0

SUSQUEHANNA COUNTY.

No. schools inspected,	50
No. pupils enrolled,	1,711
No. pupils inspected,	1,479
No. pupils not defective,	459
No. pupils defective,	1,020
Total No. defects,	1,971
EYES	
Defective vision, right eye,	340
Defective vision, left eye,	371
Corneal defects, slight,	4
Corneal defects, serious,	2
Corneal defects, blindness,	1
HEARING	
Defective hearing, right ear,	31
Defective hearing, left ear,	22
Right otorrhea, slight,	5
Right otorrhea, profuse,	0
Right otorrhea, offensive,	0
Left otorrhea, slight,	7
Left otorrhea, profuse,	0
Left otorrhea, offensive,	0
BREATHING	
Slight impairment,	37
Serious impairment,	5
Mouth breathing,	5
TEETH	
Unclean,	141
Decayed,	432
TONSILS	
Slightly enlarged,	315
Greatly enlarged,	69
Acutely inflamed,	13
ENLARGED CERVICAL GLANDS,	78
TUBERCULOSIS	
Lungs,	0
Glands,	0
Bones,	0
Joints,	1
NERVOUS DISEASE	
Chorea,	4
Epilepsy,	0
SKIN DISEASE,	2
HEAD LICE	
Nits,	7
Lice,	0
Crusted scalp,	0
DEFORMITIES,	5
NUTRITION	
Fair,	70
Poor,	3
MISCELLANEOUS DEFECTS,	1
No. pupils having 1 defect,	461
No. pupils having 2 defects,	303
No. pupils having 3 defects,	162
No. pupils having 4 defects,	68
No. pupils having 5 defects,	15
No. pupils having 6 defects,	8
No. pupils having 7 defects,	1
No. pupils having 8 defects,	2
No. pupils having 9 defects,	0
No. pupils having 10 or more defects,	0

TIOGA COUNTY.

No. schools inspected,	65
No. pupils enrolled,	2,841
No. pupils inspected,	2,450
No. pupils not defective,	471
No. pupils defective,	1,979
Total No. defects,	4,608
EYES	
Defective vision, right eye,	945
Defective vision, left eye,	922
Corneal defects, slight,	24
Corneal defects, serious,	3
Corneal defects, blindness,	2
HEARING	
Defective hearing, right ear,	125
Defective hearing, left ear,	106
Right otorrhea, slight,	10
Right otorrhea, profuse,	5
Right otorrhea, offensive,	0
Left otorrhea, slight,	9
Left otorrhea, profuse,	3
Left otorrhea, offensive,	2
BREATHING	
Slight impairment,	130
Serious impairment,	14
Mouth breathing,	76
TEETH	
Unclean,	395
Decayed,	916
TONSILS	
Slightly enlarged,	448
Greatly enlarged,	150
Acutely inflamed,	25
ENLARGED CERVICAL GLANDS,	
	66
TUBERCULOSIS	
Lungs,	0
Glands,	1
Bones,	1
Joints,	1
NERVOUS DISEASE	
Chorea,	9
Epilepsy,	0
SKIN DISEASE,	
	3
HEAD LICE	
Nits,	9
Lice,	0
Crusted scalp,	0
DEFORMITIES,	
	6
NUTRITION	
Fair,	191
Poor,	18
MISCELLANEOUS DEFECTS,	
	2
No. pupils having 1 defect,	674
No. pupils having 2 defects,	517
No. pupils having 3 defects,	431
No. pupils having 4 defects,	244
No. pupils having 5 defects,	76
No. pupils having 6 defects,	25
No. pupils having 7 defects,	11
No. pupils having 8 defects,	3
No. pupils having 9 defects,	0
No. pupils having 10 or more defects,	0

UNION COUNTY.

No. schools inspected,	21
No. pupils enrolled,	962
No. pupils inspected,	817
No. pupils not defective,	270
No. pupils defective,	547
Total No. defects,	938
EYES	
Defective vision, right eye,	107
Defective vision, left eye,	111
Corneal defects, slight,	0
Corneal defects, serious,	0
Corneal defects, blindness,	0
HEARING	
Defective hearing, right ear,	12
Defective hearing, left ear,	11
Right otorrhea, slight,	3
Right otorrhea, profuse,	0
Right otorrhea, offensive,	1
Left otorrhea, slight,	2
Left otorrhea, profuse,	0
Left otorrhea, offensive,	1
BREATHING	
Slight impairment,	24
Serious impairment,	0
Mouth breathing,	1
TEETH	
Unclean,	54
Decayed,	309
TONSILS	
Slightly enlarged,	188
Greatly enlarged,	27
Acutely inflamed,	0
ENLARGED CERVICAL GLANDS,	24
TUBERCULOSIS	
Lungs,	0
Glands,	0
Bones,	1
Joints,	1
NERVOUS DISEASE	
Chorea,	3
Epilepsy,	1
SKIN DISEASE,	0
HEAD LICE	
Nits,	1
Lice,	0
Crusted scalp,	0
DEFORMITIES,	13
NUTRITION	
Fair,	43
Poor,	0
MISCELLANEOUS DEFECTS,	0
No. pupils having 1 defect,	292
No. pupils having 2 defects,	165
No. pupils having 3 defects,	57
No. pupils having 4 defects,	27
No. pupils having 5 defects,	3
No. pupils having 6 defects,	1
No. pupils having 7 defects,	0
No. pupils having 8 defects,	2
No. pupils having 9 defects,	0
No. pupils having 10 or more defects,	0

VENANGO COUNTY.

No. schools inspected,	65
No. pupils enrolled,	2,205
No. pupils inspected,	1,837
No. pupils not defective,	464
No. pupils defective,	1,373
Total No. defects,	3,096
EYES	
Defective vision, right eye,	543
Defective vision, left eye,	535
Corneal defects, slight,	24
Corneal defects, serious,	7
Corneal defects, blindness,	1
HEARING	
Defective hearing, right ear,	155
Defective hearing, left ear,	179
Right otorrhea, slight,	51
Right otorrhea, profuse,	2
Right otorrhea, offensive,	1
Left otorrhea, slight,	26
Left otorrhea, profuse,	1
Left otorrhea, offensive,	1
BREATHING	
Slight impairment,	50
Serious impairment,	13
Mouth breathing,	20
TEETH	
Unclean,	334
Decayed,	338
TONSILS	
Slightly enlarged,	384
Greatly enlarged,	126
Acutely inflamed,	25
ENLARGED CERVICAL GLANDS,	
	24
TUBERCULOSIS	
Lungs,	8
Glands,	3
Bones,	1
Joints,	0
NERVOUS DISEASE	
Chorea,	2
Epilepsy,	1
SKIN DISEASE,	
	1
HEAD LICE	
Nits,	0
Lice,	0
Crusted scalp,	0
DEFORMITIES,	
	10
NUTRITION	
Fair,	211
Poor,	15
MISCELLANEOUS DEFECTS,	
	4
No. pupils having 1 defect,	487
No. pupils having 2 defects,	428
No. pupils having 3 defects,	240
No. pupils having 4 defects,	120
No. pupils having 5 defects,	51
No. pupils having 6 defects,	35
No. pupils having 7 defects,	10
No. pupils having 8 defects,	1
No. pupils having 9 defects,	0
No. pupils having 10 or more defects,	1

WARREN COUNTY.

No. schools inspected,	51
No. pupils enrolled,	1,706
No. pupils inspected,	1,467
No. pupils not defective,	390
No. pupils defective,	1,077
Total No. defects,	2,402
EYES	
Defective vision, right eye,	357
Defective vision, left eye,	343
Corneal defects, slight,	64
Corneal defects, serious,	7
Corneal defects, blindness,	4
HEARING	
Defective hearing, right ear,	33
Defective hearing, left ear,	34
Right otorrhea, slight,	12
Right otorrhea, profuse,	1
Right otorrhea, offensive,	2
Left otorrhea, slight,	13
Left otorrhea, profuse,	2
Left otorrhea, offensive,	9
BREATHING	
Slight impairment,	104
Serious impairment,	34
Mouth breathing,	33
TEETH	
Unclean,	182
Decayed,	438
TONSILS	
Slightly enlarged,	311
Greatly enlarged,	142
Acutely inflamed,	23
ENLARGED CERVICAL GLANDS,	81
TUBERCULOSIS	
Lungs,	3
Glands,	0
Bones,	0
Joints,	0
NERVOUS DISEASE	
Chorea,	1
Epilepsy,	2
SKIN DISEASE,	8
HEAD LICE	
Nits,	5
Lice,	1
Crusted scalp,	10
DEFORMITIES,	5
NUTRITION	
Fair,	124
Poor,	14
MISCELLANEOUS DEFECTS,	
No. pupils having 1 defect,	0
No. pupils having 2 defects,	389
No. pupils having 3 defects,	318
No. pupils having 4 defects,	205
No. pupils having 5 defects,	102
No. pupils having 6 defects,	35
No. pupils having 7 defects,	20
No. pupils having 8 defects,	6
No. pupils having 9 defects,	1
No. pupils having 10 or more defects,	1
	0

WASHINGTON COUNTY.

No. schools inspected,	42
No. pupils enrolled,	4,085
No. pupils inspected,	3,556
No. pupils not defective,	838
No. pupils defective,	2,718
Total No. defects,	5,129
EYES	
Defective vision, right eye,	779
Defective vision, left eye,	829
Corneal defects, slight,	6
Corneal defects, serious,	3
Corneal defects, blindness,	3
HEARING	
Defective hearing, right ear,	107
Defective hearing, left ear,	100
Right otorrhea, slight,	29
Right otorrhea, profuse,	0
Right otorrhea, offensive,	0
Left otorrhea, slight,	28
Left otorrhea, profuse,	1
Left otorrhea, offensive,	1
BREATHING	
Slight impairment,	93
Serious impairment,	14
Mouth breathing,	47
TEETH	
Unclean,	566
Decayed,	1,354
TONSILS	
Slightly enlarged,	573
Greatly enlarged,	243
Acutely inflamed,	12
ENLARGED CERVICAL GLANDS,	
	55
TUBERCULOSIS	
Lungs,	6
Glands,	1
Bones,	0
Joints,	1
NERVOUS DISEASE	
Chorea,	1
Epilepsy,	1
SKIN DISEASE,	
	1
HEAD LICE	
Nits,	5
Lice,	2
Crusted scalp,	7
DEFORMITIES,	
	15
NUTRITION	
Fair,	233
Poor,	13
MISCELLANEOUS DEFECTS,	
	0
No. pupils having 1 defect,	1,262
No. pupils having 2 defects,	805
No. pupils having 3 defects,	444
No. pupils having 4 defects,	143
No. pupils having 5 defects,	42
No. pupils having 6 defects,	16
No. pupils having 7 defects,	2
No. pupils having 8 defects,	3
No. pupils having 9 defects,	1
No. pupils having 10 or more defects,	0

WESTMORELAND COUNTY.

No. schools inspected,	52
No. pupils enrolled,	4,580
No. pupils inspected,	3,999
No. pupils not defective,	726
No. pupils defective,	3,273
Total No. defects,	7,033
EYES	
Defective vision, right eye,	650
Defective vision, left eye,	622
Corneal defects, slight,	8
Corneal defects, serious,	9
Corneal defects, blindness,	5
HEARING	
Defective hearing, right ear,	104
Defective hearing, left ear,	116
Right otorrhea, slight,	14
Right otorrhea, profuse,	4
Right otorrhea, offensive,	0
Left otorrhea, slight,	28
Left otorrhea, profuse,	0
Left otorrhea, offensive,	3
BREATHING	
Slight impairment,	275
Serious impairment,	19
Mouth breathing,	78
TEETH	
Unclean,	471
Decayed,	2,071
TONSILS	
Slightly enlarged,	1,235
Greatly enlarged,	543
Acutely inflamed,	32
ENLARGED CERVICAL GLANDS,	227
TUBERCULOSIS	
Lungs,	2
Glands,	0
Bones,	0
Joints,	0
NERVOUS DISEASE	
Chorea,	6
Epilepsy,	1
SKIN DISEASE,	5
HEAD LICE	
Nits,	18
Lice,	3
Crusted scalp,	116
DEFORMITIES,	16
NUTRITION	
Fair,	343
Poor,	9
MISCELLANEOUS DEFECTS,	0
No. pupils having 1 defect,	1,129
No. pupils having 2 defects,	1,136
No. pupils having 3 defects,	607
No. pupils having 4 defects,	273
No. pupils having 5 defects,	81
No. pupils having 6 defects,	26
No. pupils having 7 defects,	13
No. pupils having 8 defects,	5
No. pupils having 9 defects,	3
No. pupils having 10 or more defects,	0

WAYNE COUNTY.

No. schools inspected,	15	
No. pupils enrolled,	840	
No. pupils inspected,	720	
No. pupils not defective,	73	
No. pupils defective,	647	
Total No. defects,	1,451	
EYES		
Defective vision, right eye,	205	
Defective vision, left eye,	180	
Corneal defects, slight,	2	
Corneal defects, serious,	1	
Corneal defects, blindness,	0	
HEARING		
Defective hearing, right ear,	10	
Defective hearing, left ear,	7	
Right otorrhea, slight,	3	
Right otorrhea, profuse,	0	
Right otorrhea, offensive,	0	
Left otorrhea, slight,	0	
Left otorrhea, profuse,	0	
Left otorrhea, offensive,	0	
BREATHING		
Slight impairment,	37	
Serious impairment,	6	
Mouth breathing,	6	
TEETH		
Unclean,	155	
Decayed,	376	
TONSILS		
Slightly enlarged,	208	
Greatly enlarged,	95	
Acutely inflamed,	5	
ENLARGED CERVICAL GLANDS,		30
TUBERCULOSIS		
Lungs,	1	
Glands,	0	
Bones,	0	
Joints,	0	
NERVOUS DISEASE		
Chorea,	1	
Epilepsy,	0	
SKIN DISEASE,		1
HEAD LICE		
Nits,	51	
Lice,	3	
Cruusted scalp,	1	
DEFORMITIES,		7
NUTRITION		
Fair,	58	
Poor,	4	
MISCELLANEOUS DEFECTS,		0
No. pupils having 1 defect,	184	
No. pupils having 2 defects,	232	
No. pupils having 3 defects,	148	
No. pupils having 4 defects,	61	
No. pupils having 5 defects,	18	
No. pupils having 6 defects,	3	
No. pupils having 7 defects,	1	
No. pupils having 8 defects,	0	
No. pupils having 9 defects,	0	
No. pupils having 10 or more defects,	0	

WYOMING COUNTY.

No. schools inspected,	16
No. pupils enrolled,	670
No. pupils inspected,	558
No. pupils not defective,	122
No. pupils defective,	436
Total No. defects,	1,002
EYES	
Defective vision, right eye,	169
Defective vision, left eye,	162
Corneal defects, slight,	3
Corneal defects, serious,	1
Corneal defects, blindness,	1
HEARING	
Defective hearing, right ear,	26
Defective hearing, left ear,	21
Right otorrhea, slight,	5
Right otorrhea, profuse,	1
Right otorrhea, offensive,	0
Left otorrhea, slight,	5
Left otorrhea, profuse,	0
Left otorrhea, offensive,	0
BREATHING	
Slight impairment,	76
Serious impairment,	9
Mouth breathing,	0
TEETH	
Unclean,	65
Decayed,	193
TONSILS	
Slightly enlarged,	125
Greatly enlarged,	18
Acutely inflamed,	2
ENLARGED CERVICAL GLANDS,	
	38
TUBERCULOSIS	
Lungs,	1
Glands,	0
Bones,	0
Joints,	0
NERVOUS DISEASE	
Chorea,	2
Epilepsy,	0
SKIN DISEASE,	
	2
HEAD LICE	
Nits,	1
Lice,	0
Crusted scalp,	12
DEFORMITIES,	
	6
NUTRITION	
Fair,	51
Poor,	5
MISCELLANEOUS DEFECTS,	
	2
No. pupils having 1 defect,	148
No. pupils having 2 defects,	132
No. pupils having 3 defects,	80
No. pupils having 4 defects,	46
No. pupils having 5 defects,	19
No. pupils having 6 defects,	7
No. pupils having 7 defects,	3
No. pupils having 8 defects,	1
No. pupils having 9 defects,	0
No. pupils having 10 or more defects,	0

YORK COUNTY.

No. schools inspected,	232
No. pupils enrolled,	9,785
No. pupils inspected,	8,159
No. pupils not defective,	1,458
No. pupils defective,	6,701
Total No. defects,	15,287
EYES	
Defective vision, right eye,	1,766
Defective vision, left eye,	1,822
Corneal defects, slight,	6
Corneal defects, serious,	3
Corneal defects, blindness,	4
HEARING	
Defective hearing, right ear,	286
Defective hearing, left ear,	325
Right otorrhea, slight,	76
Right otorrhea, profuse,	4
Right otorrhea, offensive,	1
Left otorrhea, slight,	117
Left otorrhea, profuse,	7
Left otorrhea, offensive,	2
BREATHING	
Slight impairment,	720
Serious impairment,	147
Mouth breathing,	65
TEETH	
Unclean,	1,777
Decayed,	3,385
TONSILS	
Slightly enlarged,	2,093
Greatly enlarged,	716
Acutely inflamed,	78
ENLARGED CERVICAL GLANDS,	1,058
TUBERCULOSIS	
Lungs,	17
Glands,	12
Bones,	1
Joints,	1
NERVOUS DISEASE	
Chorea,	8
Epilepsy,	5
SKIN DISEASE,	22
HEAD LICE	
Nits,	15
Lice,	0
Crusted scalp,	3
DEFORMITIES,	36
NUTRITION	
Fair,	680
Poor,	28
MISCELLANEOUS DEFECTS,	
No. pupils having 1 defect,	1
No. pupils having 2 defects,	2,419
No. pupils having 3 defects,	1,863
No. pupils having 4 defects,	1,232
No. pupils having 5 defects,	667
No. pupils having 6 defects,	345
No. pupils having 7 defects,	109
No. pupils having 8 defects,	34
No. pupils having 9 defects,	9
No. pupils having 10 or more defects,	1
	2

TOTAL SHEET.

SCHOOL MEDICAL INSPECTION—THIRD CLASS DISTRICTS.
School Year 1911.

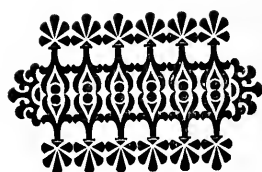
Number Third class districts inspected,	30
No. schools inspected,	854
No. pupils enrolled,	36,280
No. pupils inspected,	33,908
No. pupils not defective,	13,620
No. pupils defective,	19,188
Total No. defects,	45,074
EYES	
Defective vision, right eye,	5,957
Defective vision, left eye,	5,854
Corneal defects, slight,	210
Corneal defects, serious,	39
Corneal defects, blindness,	27
HEARING	
Defective hearing, right ear,	797
Defective hearing, left ear,	754
Right Otorrhea, slight,	162
Right Otorrhea, profuse,	25
Right Otorrhea, offensive,	13
Left Otorrhea, slight,	149
Left Otorrhea, profuse,	27
Left Otorrhea, offensive,	19
BREATHING	
Slight impairment,	1,917
Serious impairment,	391
Mouth breathing,	785
TEETH	
Unclean,	2,544
Decayed,	9,104
TONSILS	
Slightly enlarged,	5,475
Greatly enlarged,	3,144
Acutely inflamed,	159
ENLARGED CERVICAL GLANDS,	2,250
TUBERCULOSIS	
Lungs,	43
Glands,	9
Bones,	3
Joints,	8
NERVOUS DISEASE	
Chorea,	70
Epilepsy,	11
SKIN DISEASE,	140
HEAD LICE	
Nits,	507
Lice,	133
Crusted scalp,	30
DEFORMITIES,	141
NUTRITION	
Fair,	3,067
Poor,	421
MISCELLANEOUS DEFECTS,	
No. pupils having 1 defect,	110
No. pupils having 2 defects,	8,036
No. pupils having 3 defects,	6,522
No. pupils having 4 defects,	3,219
No. of pupils having 4 defects,	1,690
No. pupils having 5 defects,	714
No. pupils having 6 defects,	327
No. pupils having 7 defects,	138
No. pupils having 8 defects,	47
No. pupils having 9 defects,	21
No. pupils having 10 defects or more,	5
Conjunctivitis,	18
Blepharitis,	37

TABULATION TEACHERS' REPORTS CONCERNING DEFECTIVE CHILDREN FOURTH-CLASS DISTRICTS, YEAR 1911. RETURN REPORT END OF SCHOOL YEAR.

Teachers replying,	3,868
Pupils heard from,	70,416
Pupils improved,	12,762
Pupils not improved,	1,358
Pupils not treated,	42,791
No report,	13,505
EYES	
Improved,	3,169
Not improved,	1,001
HEARING	
Improved,	624
Not improved,	224
BREATHING	
Improved,	933
Not improved,	439
TEETH	
Improved,	8,168
Not improved,	994
TONSILS	
Improved,	2,693
Not improved,	1,306
ENLARGED CERVICAL GLANDS	
Improved,	263
Not improved,	119
TUBERCULOSIS	
Lungs, improved,	11
Lungs, not improved,	0
Glands, improved,	47
Glands, not improved,	6
Bones, improved,	5
Bones, not improved,	1
Joints, improved,	7
Joints not improved,	2
NERVOUS DISEASE	
Chorea, improved,	41
Chorea, not improved,	13
Epilepsy, improved,	0
Epilepsy, not improved,	0
SKIN DISEASE	
Improved,	135
Not improved,	19
HEAD LICE	
Improved,	339
Not improved,	21
DEFORMITIES	
Improved,	5
Not improved,	2
NUTRITION	
Improved,	1,156
Not improved,	447
MISCELLANEOUS DEFECTS	
Improved,	16
Not improved,	6

School Sanitary Inspection

FOURTH CLASS DISTRICTS 1911.



SCHOOL SANITARY INSPECTION—FOURTH CLASS DISTRICT 1911. SANITARY INSPECTION.

No. schools inspected,	3,572
No. schools insanitary,	3,036
No. schools sanitary,	536

SCHOOL BUILDING

Rooms and halls unclean,	229
Sawdust and antiseptics not used,	2,663
Dry dusting,	2,934
Light surface not 20 per cent. of floor space,	1,083
Light admitted in front of pupils,	622
Ventilation insufficient,	1,847
Stove in room,	2,793
Stove not jacketed,	1,029
Steam or hot water,	219
Furnace in cellar,	602
Room not warm,	223
Floors not warm,	279
Hot Air,	2

WATER SUPPLY

No water supply,	1
Fountain,	15
Hydrant or spigot in room,	188
Spigot in building or on ground,	246
Drilled well,	794
Dug well,	1,021
Spring,	1,095
Surface drainage not excluded,	437
Nuisance within 100 feet,	384
Menace on higher level,	287
Cooler with spigot,	688
Bucket not covered,	1,233
Not scalded daily,	1,500
Fresh supply not secured each session,	251
Individual cups not used,	2,337
Cups dipped in bucket,	1,781
Creek water,	1
Cistern,	24

GROUND POLLUTION,	148
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PRIVIES

One single,	169
Approaches not screened,	1,748
Dividing fences not tight,	1,138
Bad repair,	397
Not clean,	1,190
Objectionable odor,	1,320
No vault,	839
Vault not water tight,	785
Vault full,	500
Vault overflowing,	208
Lime or ashes not used,	1,066
Surface drainage not excluded,	962

URINALS AND FLUSH CLOSETS

Not properly vented,	21
Not clean,	13
Objectionable odor,	17
Not sufficiently ventilated,	17

ADAMS COUNTY.

No. schools inspected,	74
No. schools insanitary,	71
No. schools sanitary,	3

SCHOOL BUILDING

Rooms and halls unclean,	12
Sawdust and antiseptics not used,	57
Dry dusting,	59
Light surface not 20 per cent. of floor space,	46
Light admitted in front of pupils,	18
Stove in room,	72
Ventilation insufficient,	49
Stove not jacketed,	44
Steam or hot water,	6
Furnace in cellar,	9
Room not warm,	10
Floors not warm,	10

WATER SUPPLY

Hydrant or spigot in room,	4
Spigot in building or on ground,	17
Drilled well,	25
Dug well,	24
Spring,	4
Surface drainage not excluded,	9
Nuisance within 100 feet,	7
Menace on higher level,	27
Cooler with spigot,	23
Bucket not covered,	50
Not scalded daily,	28
Fresh supply not secured each session,	31
Individual cups not used,	32
Cups dipped in bucket,	32

GROUND POLLUTION

PRIVIES

One single,	1
Approaches not screened,	18
Dividing fences not tight,	10
Bad repair,	9
Not clean,	24
Objectionable odor,	25
No vault,	41
Vault not water tight,	15
Vault full,	3
Vault overflowing,	2
Lime or ashes not used,	57
Surface drainage not excluded,	29

URINALS AND FLUSH CLOSETS

Not properly vented,	1
Not clean,	1
Objectionable odor,	1
Not sufficiently ventilated,	1

ALLEGHENY COUNTY.

No. schools inspected,	63
No. schools insanitary,	50
No. schools sanitary,	13

SCHOOL BUILDING

Rooms and halls unclean,	7
Sawdust and antiseptics not used,	40
Dry dusting,	51
Light surface not 20 per cent. of floor space,	17
Ventilation insufficient,	28
Light admitted in front of pupils,	7
Stove in room,	38
Stove not jacketed,	11
Steam or hot water,	7
Furnace in cellar,	17
Room not warm,	1
Floors not warm,	2

WATER SUPPLY

No water supply,	1
Hydrant or spigot in room,	6
Spigot in building or on ground,	12

Drilled well,	30
Dug well,	11
Spring,	5
Surface drainage not excluded,	14
Nuisance within 100 feet,	7
Menace on higher level,	2
Cooler with spigot,	5
Bucket not covered,	27
Not scalded daily,	38
Fresh supply not secured each session,	12
Individual cups not used,	42
Cups dipped in bucket,	39

GROUND POLLUTION,	6
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PRIVIES

One single,	1
Approaches not screened,	26
Dividing fences not tight,	19
Bad repair,	15
Not clean,	19
Objectionable odor,	22
No vault,	26
Vault not water tight,	11
Vault full,	2
Vault overflowing,	32
Lime or ashes not used,	33
Surface drainage not excluded,	

URINALS AND FLUSH CLOSETS

Not properly vented,	
Not clean,	1
Objectionable odor,	1
Not sufficiently ventilated,	

ARMSTRONG COUNTY.

No. schools inspected,	39
No. schools insanitary,	32
No. schools sanitary,	7

SCHOOL BUILDING

Rooms and halls unclean,	2
Sawdust and antiseptics not used,	34
Dry dusting,	36
Light surface not 20 per cent. of floor space,	9
Light admitted in front of pupils,	1
Ventilation insufficient,	18
Stove in room,	38
Stove not jacketed,	21
Steam or hot water,	
Furnace in cellar,	1
Room not warm,	1
Floors not warm,	4

WATER SUPPLY

Hydrant or spigot in room,	
Spigot in building or on ground,	5
Drilled well,	10
Dug well,	23
Spring,	15
Surface drainage not excluded,	6
Nuisance within 100 feet,	
Menace on higher level,	38
Cooler with spigot,	33
Bucket not covered,	19
Not scalded daily,	36
Fresh supply not secured each session,	38
Individual cups not used,	
Cups dipped in bucket,	

GROUND POLLUTION,	3
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PRIVIES

One single,	1
Approaches not screened,	21
Dividing fences not tight,	25
Bad repair,	13
Not clean,	17
Objectionable odor,	21
No vault,	3
Vault not water tight,	6
Vault full,	9
Vault overflowing,	4
Lime or ashes not used,	7
Surface drainage not excluded,	22

URINALS AND FLUSH CLOSETS

Not properly vented, .....	.....
Not clean, .....	.....
Objectionable odor, .....	.....
Not sufficiently ventilated, .....	.....

BEAVER COUNTY.

No. schools inspected,	22
No. schools insanitary,	22
No. schools sanitary, .....	.....

SCHOOL BUILDING

Rooms and halls unclean, .....	.....
Sawdust and antiseptics not used,	17
Dry dusting,	21
Light surface not 20 per cent. of floor space,	10
Light admitted in front of pupils,	6
Ventilation insufficient,	15
Stove in room,	11
Stove not jacketed,	3
Steam or hot water,	1
Furnace in cellar,	7
Room not warm,	2
Floors not warm,	2

WATER SUPPLY

Hydrant or spigot in room,	2
Spigot in building or on ground,	4
Drilled well,	6
Dug well,	3
Spring,	3
Surface drainage not excluded, .....	.....
Nuisance within 100 feet,	3
Menace on higher level,	6
Cooler with spigot,	3
Bucket not covered,	1
Not scalded daily,	2
Fresh supply not secured each session,	2
Individual cups not used,	14
Cups dipped in bucket,	10

GROUND POLLUTION,	1
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PRIVIES

One single,
Approaches not screened,	5
Dividing fences not tight,	4
Bad repair,	1
Not clean,	5
Objectionable odor,	4
No vault, .....	.....
Vault not water tight, .....	.....
Vault full,	2
Vault overflowing, .....	.....
Lime or ashes not used, .....	.....
Surface drainage not excluded, .....	.....

URINALS AND FLUSH CLOSETS

Not properly vented,	8
Not clean, .....	.....
Objectionable odor,	1
Not sufficiently ventilated,	9

BEDFORD COUNTY

No. schools inspected,	83
No. schools insanitary,	72
No. schools sanitary,	11

SCHOOL BUILDING

Rooms and halls unclean,	35
Sawdust and antiseptics not used,	22
Dry dusting,	81
Light surface not 20 per cent. of floor space,	40
Light admitted in front of pupils,	15
Ventilation insufficient,	53
Stove in room,	79
Stove not jacketed,	69
Steam or hot water,	4
Furnace in cellar,	5
Room not warm,	1
Floors not warm,	

WATER SUPPLY

Hydrant or spigot in room,	1
Spigot in building or on ground,	2
Drilled well,	11
Dug well,	17
Spring,	48
Surface drainage not excluded,	1
Nuisance within 100 feet,	20
Menace on higher level,	22
Cooler with spigot,	1
Bucket not covered,	7
Not scalded daily,	5
Fresh supply not secured each session,	
Individual cups not used,	75
Cups dipped in bucket,	66

GROUND POLLUTION,	11
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PRIVIES

One single,	25
Approaches not screened,	58
Dividing fences not tight,	51
Bad repair,	1
Not clean,	35
Objectionable odor,	35
No vault,	27
Vault not water tight,	3
Vault full,	10
Vault overflowing,	3
Lime or ashes not used,	4
Surface drainage not excluded,	3

URINALS AND FLUSH CLOSETS

Not properly vented,	
Not clean,	
Objectionable odor,	
Not sufficiently ventilated,	

BERKS COUNTY.

No. schools inspected,	117
No. schools insanitary,	59
No. schools sanitary,	58

SCHOOL BUILDING

Rooms and halls unclean,	
Sawdust and antiseptics not used,	91
Dry dusting,	76
Light surface not 20 per cent. of floor space,	60
Light admitted in front of pupils,	8
Ventilation insufficient,	79
Stove in room,	69
Stove not jacketed,	1
Steam or hot water,	19
Furnace in cellar,	46
Room not warm,	
Floors not warm,	1

WATER SUPPLY

Hydrant or spigot in room,	23
Spigot in building or on ground,	9
Drilled well,	10
Dug well,	46
Spring,	19
Surface drainage not excluded,	3
Nuisance within 100 feet,	5
Menace on higher level,	3
Cooler with spigot,	56
Bucket not covered,	7
Not scalded daily, .....	.....
Fresh supply not secured each session, .....	.....
Individual cups not used,	22
Cups dipped in bucket,	9

GROUND POLLUTION

PRIVIES

One single, .....	.....
Approaches not screened,	72
Dividing fences not tight,	19
Bad repair,	6
Not clean,	11
Objectionable odor,	19
No vault,	10
Vault not water tight,	1
Vault full,	8
Vault overflowing, .....	.....
Lime or ashes not used,	1
Surface drainage not excluded,	2

URINALS AND FLUSH CLOSETS

Not properly vented, .....	.....
Not clean,	3
Objectionable odor,	1
Not sufficiently ventilated, .....	.....

BLAIR COUNTY.

No. schools inspected,	19
No. schools insanitary,	19
No. schools sanitary, .....	.....

SCHOOL BUILDING

Rooms and halls unclean, .....	.....
Sawdust and antiseptics not used,	6
Dry dusting,	15
Light surface not 20 per cent. of floor space, .....	.....
Light admitted in front of pupils,	2
Ventilation insufficient,	5
Stove in room,	16
Stove not jacketed,	4
Steam or hot water,	1
Furnace in cellar,	1
Room not warm, .....	.....
Floors not warm,	1

WATER SUPPLY

Hydrant or spigot in room,	1
Spigot in building or on ground, .....	.....
Drilled well,	1
Dug well,	7
Spring,	10
Surface drainage not excluded, .....	.....
Nuisance within 100 feet,	6
Menace on higher level,	4
Cooler with spigot,	1
Bucket not covered, .....	.....
Not scalded daily,	1
Fresh supply not secured each session,	1
Individual cups not used,	18
Cups dipped in bucket,	17

GROUND POLLUTION

PRIVIES

One single,	1
Approaches not screened,	10
Dividing fences not tight,	5
Bad repair,	7
Not clean,	5
Objectionable odor,	4
No vault,	7
Vault not water tight,	
Vault full,	
Vault overflowing,	
Lime or ashes not used,	
Surface drainage not excluded,	

URINALS AND FLUSH CLOSETS

Not properly vented,	
Not clean,	
Objectionable odor,	
Not sufficiently ventilated,	

BUTLER COUNTY.

No. schools inspected,	61
No. schools insanitary,	51
No. schools sanitary,	10

SCHOOL BUILDING

Rooms and halls unclean,	54
Sawdust and antiseptics not used,	56
Dry dusting,	17
Light surface not 20 per cent. of floor space,	8
Light admitted in front of pupils,	34
Ventilation insufficient,	59
Stove in room,	43
Stove not jacketed,	1
Steam or hot water,	1
Furnace in cellar,	
Room not warm,	
Floors not warm,	

WATER SUPPLY

Hydrant or spigot in room,	1
Spigot in building or on ground,	21
Drilled well,	4
Dug well,	33
Spring,	9
Surface drainage not excluded,	6
Nuisance within 100 feet,	6
Menace on higher level,	6
Cooler with spigot,	26
Bucket not covered,	32
Not scalded daily,	5
Fresh supply not secured each session,	53
Individual cups not used,	46
Cups dipped in bucket,	

GROUND POLLUTION,	2
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PRIVIES

One single,	4
Approaches not screened,	41
Dividing fences not tight,	40
Bad repair,	9
Not clean,	21
Objectionable odor,	22
No vault,	13
Vault not water tight,	32
Vault full,	3
Vault overflowing,	2
Lime or ashes not used,	10
Surface drainage not excluded,	14

URINALS AND FLUSH CLOSETS

Not properly vented, .....	.....
Not clean, .....	.....
Objectionable odor, .....	.....
Not sufficiently ventilated, .....	.....

BRADFORD COUNTY.

No. schools inspected,	50
No. schools insanitary,	47
No. schools sanitary,	3

SCHOOL BUILDING

Rooms and halls unclean, .....	.....
Sawdust and antiseptics not used,	45
Dry dusting,	42
Light surface not 20 per cent. of floor space,	14
Light admitted in front of pupils,	10
Ventilation insufficient,	7
Stove in room,	43
Stove not jacketed,	12
Steam or hot water,	4
Furnace in cellar,	2
Room not warm,	3
Floors not warm,	2

WATER SUPPLY

Hydrant or spigot in room, .....	.....
Spigot in building or on ground,	4
Drilled well,	9
Dug well,	24
Spring,	13
Surface drainage not excluded,	4
Nuisance within 100 feet,	2
Menace on higher level,	2
Cooler with spigot,	14
Bucket not covered,	6
Not scalded daily,	12
Fresh supply not secured each session, .....	.....
Individual cups not used,	24
Cups dipped in bucket,	22

GROUND POLLUTION

PRIVIES

One single,	3
Approaches not screened,	32
Dividing fences not tight,	8
Bad repair,	4
Not clean,	24
Objectionable odor,	21
No vault,	28
Vault not water tight, .....	.....
Vault full, .....	.....
Vault overflowing, .....	.....
Lime or ashes not used,	15
Surface drainage not excluded,	15

URINALS AND FLUSH CLOSETS

Not properly vented, .....	.....
Not clean, .....	.....
Objectionable odor, .....	.....
Not sufficiently ventilated, .....	.....

BUCKS COUNTY.

No. schools inspected,	37
No. schools insanitary,	29
No. schools sanitary,	8

SCHOOL BUILDING

Rooms and halls unclean,	3
Sawdust and antiseptics not used,	25
Dry dusting,	21

Light surface not 20 per cent. of floor space,	15
Light admitted in front of pupils,	8
Ventilation insufficient,	14
Stove in room,	27
Stove not jacketed,	9
Steam or hot water,	1
Furnace in cellar,	7
Room not warm,	3
Floors not warm,	2

WATER SUPPLY

Hydrant or spigot in room,	1
Spigot in building or on ground,	2
Drilled well,	7
Dug well,	16
Spring,	1
Surface drainage not excluded,	1
Nuisance within 100 feet,	3
Menace on higher level,	1
Cooler with spigot,	3
Bucket not covered,	19
Not scalded daily,	20
Fresh supply not secured each session,	3
Individual cups not used,	20
Cups dipped in bucket,	17

GROUND POLLUTION

PRIVIES

One single,	6
Approaches not screened,	13
Dividing fences not tight,	2
Bad repair,	2
Not clean,	8
Objectionable odor,	16
No vault,	6
Vault not water tight,	3
Vault full,	6
Vault overflowing,	1
Lime or ashes not used,	24
Surface drainage not excluded,	6

URINALS AND FLUSH CLOSETS

Not properly vented, .....	.....
Not clean, .....	.....
Objectionable odor, .....	.....
Not sufficiently ventilated, .....	.....

CAMBRIA COUNTY.

No. schools inspected,	102
No. schools insanitary,	97
No. schools sanitary,	5

SCHOOL BUILDING

Rooms and halls unclean,	15
Saw dust and antiseptics not used,	90
Dry dusting,	95
Light surface not 20 per cent. of floor space,	12
Light admitted in front of pupils,	10
Ventilation insufficient,	49
Stove in room,	91
Stove not jacketed,	29
Steam or hot water, .....	.....
Rooms not warm,	3
Floors not warm,	11
Furnace in cellar,	7

WATER SUPPLY

Hydrant or spigot in room,	7
Spigot in building or on ground,	4
Drilled well,	15
Dug well,	24
Spring,	53
Surface drainage not excluded,	37

Nuisance within 100 feet,	11
Menace on higher level,	14
Cooler with spigot,	3
Bucket not covered,	69
Not scalded daily,	86
Fresh supply not secured each session,	17
Individual cups not used,	95
Cups dipped in bucket,	91
GROUND POLLUTION,	4
PRIVIES	
One single,	1
Approaches not screened,	61
Dividing fences not tight,	58
Bad repair,	25
Not clean,	49
Objectionable odor,	44
No vault,	5
Vault not water tight,	50
Vault full,	14
Vault overflowing,	9
Lime or ashes not used,	51
Surface drainage not excluded,	46
URINALS AND FLUSH CLOSETS	
Not properly vented,	
Not clean,	
Objectionable odor,	
Not sufficiently ventilated,	

CAMERON COUNTY.

No. schools inspected,	31
No. schools insanitary,	24
No. schools sanitary,	7
SCHOOL BUILDING	
Rooms and halls unclean,	2
Sawdust and antiseptics not used,	27
Dry dusting,	30
Light surface not 20 per cent. of floor space,	13
Light admitted in front of pupils,	22
Ventilation insufficient,	4
Stove in room,	28
Stove not jacketed,	12
Steam or hot water,	
Furnace in cellar,	2
Room not warm,	1
Floors not warm,	
WATER SUPPLY	
Hydrant or spigot in room,	2
Spigot in building or on ground,	
Drilled well,	3
Dug well,	7
Spring,	16
Surface drainage not excluded,	
Nuisance within 100 feet,	1
Menace on higher level,	
Cooler with spigot,	
Bucket not covered,	7
Not scalded daily,	21
Fresh supply not secured each session,	
Individual cups not used,	14
Cups dipped in bucket,	17
GROUND POLLUTION	2
PRIVIES	
One single,	4
Approaches not screened,	16
Dividing fences not tight,	14
Bad repair,	
Not clean,	17

Objectionable odor,	19
No vault,	6
Vault not water tight, .....	.....
Vault full,	5
Vault overflowing, .....	.....
Lime or ashes not used,	16
Surface drainage not excluded,	13

URINALS AND FLUSH CLOSETS

Not properly vented, .....	.....
Not clean,	1
Objectionable odor,	1
Not sufficiently ventilated,	1

CARBON COUNTY.

No. schools inspected,	20
No. schools sanitary,	18
No. schools sanitary, .....	.....

SCHOOL BUILDING

Rooms and halls unclean,	1
Sawdust and antiseptics not used,	12
Dry dusting,	18
Light surface not 20 per cent. of floor space,	4
Light admitted in front of pupils,	2
Ventilation insufficient,	6
Stove in room,	12
Stove not jacketed, .....	.....
Steam or hot water,	2
Furnace in cellar,	7
Room not warm, .....	.....
Floors not warm, .....	.....

WATER SUPPLY

Cistern,	1
Hydrant or spigot in room,	3
Spigot in building or on ground,	3
Drilled well,	2
Dug well,	2
Spring,	7
Surface drainage not excluded, .....	.....
Nuisance within 100 feet,	2
Menace on higher level, .....	.....
Cooler with spigot, .....	.....
Bucket not covered,	11
Not scalded daily, .....	.....
Fresh supply not secured each session, .....	.....
Individual cups not used,	15
Cups dipped in bucket,	12

GROUND POLLUTION

PRIVIES

One single, .....	.....
Approaches not screened,	12
Dividing fences not tight,	2
Bad repair,	1
Not clean,	7
Objectionable odor,	7
No vault, .....	.....
Vault not water tight,	1
Vault full,	5
Vault overflowing,	1
Lime or ashes not used,	1
Surface drainage not excluded,	1

URINALS AND FLUSH CLOSETS

Not properly vented, .....	.....
Not clean, .....	.....
Objectionable odor, .....	.....
Not sufficiently ventilated, .....	.....

CENTRE COUNTY.

No. schools inspected,	37
No. schools insanitary,	26
No. schools sanitary,	11

SCHOOL BUILDING

Rooms and halls unclean,	4
Sawdust and antiseptics not used,	14
Dry dusting,	32
Light surface not 20 per cent. of floor space,	8
Light admitted in front of pupils,	2
Ventilation insufficient,	29
Stove in room,	32
Stove not jacketed,	18
Steam or hot water,	1
Furnace in cellar,	1
Room not warm,	1
Floors not warm,	6

WATER SUPPLY

Hydrant or spigot in room,	3
Spigot in building or on ground,	2
Drilled well,	10
Dug well,	17
Spring,	6
Surface drainage not excluded,	8
Nuisance within 100 feet,	9
Menace on higher level,	10
Cooler with spigot,	3
Bucket not covered,	7
Not scalded daily,	25
Fresh supply not secured each session,	21
Individual cups not used,	
Cups dipped in bucket,	

GROUND POLLUTION,	5
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PRIVIES

One single,	19
Approaches not screened,	9
Dividing fences not tight,	
Bad repair,	14
Not clean,	20
Objectionable odor,	1
No vault,	
Vault not water tight,	5
Vault full,	
Vault overflowing,	8
Lime or ashes not used,	7
Surface drainage not excluded,	

URINALS AND FLUSH CLOSETS

Not properly vented,	
Not clean,	
Objectionable odor,	
Not sufficiently ventilated,	

CLARION COUNTY.

No. schools inspected,	35
No. schools insanitary,	33
No. schools sanitary,	2

SCHOOL BUILDING

Rooms and halls unclean,	1
Sawdust and antiseptics not used,	33
Dry dusting,	26
Light surface not 20 per cent. of floor space,	10
Light admitted in front of pupils,	
Ventilation insufficient,	11
Stove in room,	34
Stove not jacketed,	26
Steam or hot water,	
Furnace in cellar,	1
Room not warm,	6
Floors not warm,	6

WATER SUPPLY

Hydrant or spigot in room,	1
Spigot in building or on ground,	2
Drilled well,	6
Dug well,	31
Spring,	20
Surface drainage not excluded,	1
Nuisance within 100 feet,	1
Menace on higher level,	4
Cooler with spigot,	10
Bucket not covered,	23
Not scalded daily,	7
Fresh supply not secured each session,	26
Individual cups not used,	25
Cups dipped in bucket,	

GROUND POLLUTION

PRIVIES

One single,	4
Approaches not screened,	30
Dividing fences not tight,	29
Bad repair,	1
Not clean,	15
Objectionable odor,	20
No vault,	2
Vault not water tight,	23
Vault full,	10
Vault overflowing,	6
Lime or ashes not used,	19
Surface drainage not excluded,	12

URINALS AND FLUSH CLOSETS

Not properly vented,	
Not clean,	
Objectionable odor,	
Not sufficiently ventilated,	

CHESTER COUNTY.

No. schools inspected,	96
No. schools insanitary,	82
No. schools sanitary,	14

SCHOOL BUILDING

Rooms and halls unclean,	57
Sawdust and antiseptics not used,	83
Dry dusting,	38
Light surface not 20 per cent. of floor space,	24
Light admitted in front of pupils,	55
Ventilation insufficient,	63
Stove in room,	13
Stove not jacketed,	3
Steam or hot water,	28
Furnace in cellar,	3
Room not warm,	3
Floors not warm,	3

WATER SUPPLY

Hydrant or spigot in room,	2
Spigot in building or on ground,	4
Drilled well,	17
Dug well,	45
Spring,	21
Surface drainage not excluded,	6
Nuisance within 100 feet,	13
Menace on higher level,	8
Cooler with spigot,	30
Bucket not covered,	9
Not scalded daily,	5
Fresh supply not secured each session,	4
Individual cups not used,	40
Cups dipped in bucket,	35

GROUND POLLUTION,	1
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PRIVIES

One single,	10
Approaches not screened,	35
Dividing fences not tight,	25
Bad repair,	4
Not clean,	16
Objectionable odor,	39
No vault,	15
Vault not water tight,	5
Vault full,	15
Vault overflowing,	5
Lime or ashes not used,	13
Surface drainage not excluded,	13

URINALS AND FLUSH CLOSETS

Not properly vented, .....	.....
Not clean, .....	.....
Objectionable odor, .....	.....
Not sufficiently ventilated,	1

CLINTON COUNTY.

No. schools inspected,	61
No. schools insanitary,	50
No. schools sanitary,	11

SCHOOL BUILDING

Rooms and halls unclean, .....	.....
Sawdust and antiseptics not used,	34
Dry dusting,	33
Light surface not 20 per cent. of floor space,	35
Light admitted in front of pupils,	5
Ventilation insufficient,	15
Stove in room,	32
Stove not jacketed, .....	.....
Steam or hot water,	3
Furnace in cellar,	29
Room not warm,	1
Floors not warm,	1

WATER SUPPLY

Hydrant or spigot in room,	9
Spigot in building or on ground,	15
Drilled well,	12
Dug well,	10
Spring,	8
Surface drainage not excluded, .....	.....
Nuisance within 100 feet,	2
Menace on higher level,	2
Cooler with spigot,	7
Bucket not covered,	8
Not scalded daily,	9
Fresh supply not secured each session,	5
Individual cups not used,	37
Cups dipped in bucket,	20

GROUND POLLUTION,	1
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PRIVIES

One single,	2
Approaches not screened,	10
Dividing fences not tight,	5
Bad repair,	4
Not clean,	11
Objectionable odor,	10
No vault,	1
Vault not water tight,	12
Vault full,	1
Vault overflowing, .....	.....
Lime or ashes not used,	5
Surface drainage not excluded, .....	.....

URINALS AND FLUSH CLOSETS

Not properly vented, .....	.....
Not clean, .....	.....
Objectionable odor, .....	.....
Not sufficiently ventilated, .....	.....

COLUMBIA COUNTY.

No. schools inspected,	68
No. schools insanitary,	64
No. schools sanitary,	4

SCHOOL BUILDING

Rooms and halls unclean,	9
Sawdust and antiseptics not used,	60
Dry dusting,	59
Light surface not 20 per cent. of floor space,	37
Light admitted in front of pupils,	7
Ventilation insufficient,	34
Stove in room,	61
Stove not jacketed,	40
Steam or hot water,	2
Room not warm,	3
Furnace in cellar,	5
Floors not warm,	4

WATER SUPPLY

Hydrant or spigot in room,	4
Spigot in building or on ground,	3
Drilled well,	4
Dug well,	29
Spring,	30
Surface drainage not excluded,	1
Nuisance within 100 feet,	12
Menace on higher level,	6
Cooler with spigot,	8
Bucket not covered,	32
Not scalded daily,	45
Fresh supply not secured each session,	6
Individual cups not used,	46
Cups dipped in bucket,	45

GROUND POLLUTION,	3
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PRIVIES

One single,	5
Approaches not screened,	23
Dividing fences not tight,	14
Bad repair,	5
Not clean,	30
Objectionable odor,	22
No vault,	5
Vault not water tight,	15
Vault full,	14
Vault overflowing,	3
Lime or ashes not used,	14
Surface drainage not excluded,	26

URINALS AND FLUSH CLOSETS

Not properly vented, .....	.....
Not clean, .....	.....
Objectionable odor, .....	.....
Not sufficiently ventilated, .....	.....

CRAWFORD COUNTY.

No. schools inspected,	102
No. schools insanitary,	102
No. schools sanitary, .....	.....

SCHOOL BUILDING

Rooms and halls unclean,	5
Sawdust and antiseptics not used,	89
Dry dusting,	101
Light surface not 20 per cent. of floor space,	48
Light admitted in front of pupils,	16
Ventilation insufficient,	17
Stove in room,	101
Stove not jacketed,	61
Steam or hot water, .....	.....
Furnace in cellar,	2
Room not warm,	3
Floors not warm,	4

WATER SUPPLY

Hydrant or spigot in room,	48
Spigot in building or on ground,	22
Drilled well,	29
Dug well,	15
Spring,	6
Surface drainage not excluded,	2
Nuisance within 100 feet,	78
Menace on higher level,	62
Cooler with spigot,	6
Bucket not covered,	74
Not scalded daily,	86
Fresh supply not secured each session,	
Individual cups not used,	
Cups dipped in bucket,	

GROUND POLLUTION, 9

PRIVIES

One single,	72
Approaches not screened,	50
Dividing fences not tight,	17
Bad repair,	42
Not clean,	50
Objectionable odor,	68
No vault,	18
Vault not water tight,	5
Vault full,	3
Vault overflowing,	39
Lime or ashes not used,	42
Surface drainage not excluded,	

URINALS AND FLUSH CLOSETS

Not properly vented,	
Not clean,	
Objectionable odor,	1
Not sufficiently ventilated,	1

CUMBERLAND COUNTY.

No. schools inspected,	64
No. schools insanitary,	56
No. schools sanitary,	8

SCHOOL BUILDING

Rooms and halls unclean,	50
Sawdust and antiseptics not used,	48
Dry dusting,	15
Light surface not 20 per cent. of floor space,	16
Light admitted in front of pupils,	53
Ventilation insufficient,	52
Stove in room,	
Stove not jacketed,	
Steam or hot water,	5
Furnace in cellar,	10
Room not warm,	
Floors not warm,	
Hot air,	2

WATER SUPPLY

Cistern,	1
Hvdrant or spigot in room,	6
Spigot in building or on ground,	5
Drilled well,	9
Dug well,	39
Spring,	3
Surface drainage not excluded,	1
Nuisance within 100 feet,	2
Cooler with spigot,	48
Bucket not covered,	
Not scalded daily,	
Fresh supply not secured each session,	
Individual cups not used,	44
Cups dipped in bucket,	

GROUND POLLUTION

PRIVIES

One single, .....	.....
Approaches not screened,	35
Dividing fences not tight,	15
Bad repair,	1
Not clean,	18
Objectionable odor,	14
No vault,	12
Vault not water tight,	1
Vault full,	7
Vault overflowing,	1
Lime or ashes not used, .....	.....
Surface drainage not excluded,	9

URINALS AND FLUSH CLOSETS

Not properly vented, .....	.....
Not clean, .....	.....
Objectionable odor, .....	.....
Not sufficiently ventilated, .....	.....

DAUPHIN COUNTY.

No. schools inspected,	66
No. schools insanitary,	32
No. schools sanitary,	34

SCHOOL BUILDING

Rooms and halls unclean, .....	.....
Sawdust and antiseptics not used,	42
Dry dusting,	59
Light surface not 20 per cent. of floor space,	11
Light admitted in front of pupils,	5
Ventilation insufficient,	60
Stove in room,	44
Stove not jacketed, .....	.....
Steam or hot water, .....	.....
Furnace in cellar,	13
Room not warm,	1
Floors not warm,	1

WATER SUPPLY

Hydrant or spigot in room,	7
Spigot in building or on ground,	10
Drilled well,	24
Dug well,	8
Spring,	5
Surface drainage not excluded, .....	.....
Nuisance within 100 feet,	3
Menace on higher level,	4
Cooler with spigot,	18
Bucket not covered,	4
Not scalded daily,	2
Fresh supply not secured each session, .....	.....
Individual cups not used,	18
Cups dipped in bucket,	7

GROUND POLLUTION

PRIVIES

One single,	2
Approaches not screened,	10
Dividing fences not tight,	3
Bad repair,	2
Not clean,	14
Objectionable odor,	13
No vault,	17
Vault not water tight, .....	.....
Vault full,	12
Vault overflowing,	4
Lime or ashes not used,	2
Surface drainage not excluded,	2

URINALS AND FLUSH CLOSETS

Not properly vented, .....	.....
Not clean, .....	.....
Objectionable odor, .....	.....
Not sufficiently ventilated, .....	.....

DELAWARE COUNTY.

No. schools inspected,	74
No. schools insanitary,	39
No. schools sanitary,	35

SCHOOL BUILDING

Rooms and halls unclean,	8
Sawdust and antiseptics not used,	38
Dry dusting,	60
Light surface not 20 per cent. of floor space,	3
Light admitted in front of pupils,	28
Ventilation insufficient,	52
Stove in room,	18
Stove not jacketed, .....	.....
Steam or hot water,	28
Furnace in cellar,	55
Room not warm,	2
Floors not warm,	2

WATER SUPPLY

Hydrant or spigot in room,	23
Spigot in building or on ground,	29
Drilled well,	9
Dug well,	10
Spring,	2
Surface drainage not excluded, .....	.....
Nuisance within 100 feet,	2
Menace on higher level,	2
Cooler with spigot,	1
Bucket not covered, .....	.....
Not scalded daily,	1
Fresh supply not secured each session, .....	.....
Individual cups not used,	27
Cups dipped in bucket,	1

GROUND POLLUTION, 1

PRIVIES

One single,	1
Approaches not screened,	8
Dividing fences not tight,	6
Bad repair,	2
Not clean,	11
Objectionable odor,	15
No vault,	1
Vault not water tight,	3
Vault full,	2
Vault overflowing,	2
Lime or ashes not used,	3
Surface drainage not excluded,	3

URINALS AND FLUSH CLOSETS

Not properly vented, .....	.....
Not clean, .....	.....
Objectionable odor,	1
Not sufficiently ventilated, .....	.....

ELK COUNTY.

No. schools inspected,	70
No. schools insanitary,	58
No. schools sanitary,	12

SCHOOL BUILDING

Rooms and halls unclean,	1
Sawdust and antiseptics not used,	58

Dry dusting,	46
Light surface not 20 per cent. of floor space,	6
Light admitted in front of pupils,	18
Ventilation insufficient,	43
Stove in room,	59
Stove not jacketed,	10
Steam or hot water,	1
Furnace in cellar,	8
Room not warm,	5
Floors not warm,	3

WATER SUPPLY

Hydrant or spigot in room,	8
Spigot in building or on ground,	4
Drilled well,	11
Dug well,	8
Spring,	37
Surface drainage not excluded,	10
Nuisance within 100 feet,	13
Menace in higher level,	5
Cooler with spigot,	2
Bucket not covered,	46
Not scalded daily,	40
Fresh supply not secured each session,	13
Individual cups not used,	55
Cups dipped in bucket,	41

GROUND POLLUTION,	1
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PRIVIES

One single,	10
Approaches not screened,	40
Dividing fences not tight,	33
Bad repair,	16
Not clean,	22
Objectionable odor,	38
No vault,	38
Vault not water tight,	1
Vault full,	1
Vault overflowing,	36
Lime or ashes not used,	29
Surface drainage not excluded,	

URINALS AND FLUSH CLOSETS

Not properly vented,	1
Not clean,	
Objectionable odor,	
Not sufficiently ventilated,	1

ERIE COUNTY.

No. schools inspected,	117
No. schools insanitary,	98
No. schools sanitary,	19

SCHOOL BUILDING

Rooms and halls unclean,	21
Sawdust and antiseptics not used,	106
Dry dusting,	24
Light surface not 20 per cent. of floor space,	47
Light admitted in front of pupils,	57
Ventilation insufficient,	100
Stove in room,	21
Stove not jacketed,	13
Steam or hot water,	18
Furnace in cellar,	
Room not warm,	9
Floors not warm,	

WATER SUPPLY

Hydrant or spigot in room,	3
Spigot in building or on ground,	3
Drilled well,	66
Dug well,	37

Spring,	6
Surface drainage not excluded,	1
Nuisance within 100 feet,	17
Menace on higher level,	9
Cooler with spigot,	8
Bucket not covered,	44
Not scalded daily,	14
Fresh supply not secured each session,	2
Individual cups not used,	98
Cups dipped in bucket,	85
GROUND POLLUTION,	10
PRIVIES	
One single,	4
Approaches not screened,	69
Dividing fences not tight,	39
Bad repair,	18
Not clean,	68
Objectionable odor,	69
No vault,	30
Vault not water tight,	5
Vault full,	25
Vault overflowing,	18
Lime or ashes not used,	9
Surface drainage not excluded,	16
URINALS AND FLUSH CLOSETS	
Not properly vented,	
Not clean,	
Objectionable odor,	
Not sufficiently ventilated,	

FAYETTE COUNTY.

No. schools inspected,	21
No. schools insanitary,	20
No. schools sanitary,	1
SCHOOL BUILDING	
Rooms and halls unclean,	6
Sawdust and antiseptics not used,	15
Dry dusting,	18
Light surface not 20 per cent. of floor space,	5
Ventilation insufficient,	2
Stove in room,	8
Stove not jacketed,	1
Steam or hot water,	1
Furnace in cellar,	3
Room not warm,	3
Floors not warm,	2
WATER SUPPLY	
Hydrant or spigot in room,	
Spigot in building or on ground,	1
Drilled well,	5
Dug well,	5
Spring,	10
Nuisance within 100 feet,	
Surface drainage not excluded,	9
Menace on higher level,	2
Cooler with spigot,	3
Bucket not covered,	8
Not scalded daily,	15
Fresh supply not secured each session,	3
Individual cups not used,	18
Cups dipped in bucket,	15
GROUND POLLUTION,	1
PRIVIES	
One single,	
Approaches not screened,	13
Dividing fences not tight,	10
Bad repair,	7
Not clean,	9

Objectionable odor,	7
No vault,	6
Vault not water tight,	13
Vault full,	5
Vault overflowing,	12
Lime or ashes not used,	12
Surface drainage not excluded,	12

URINALS AND FLUSH CLOSETS

Not properly vented, .....	.....
Not clean, .....	.....
Objectionable odor, .....	.....
Not sufficiently ventilated, .....	.....

FOREST COUNTY.

No. schools inspected,	10
No. schools insanitary,	8
No. schools sanitary,	2

SCHOOL BUILDING

Rooms and halls unclean, .....	.....
Sawdust and antiseptics not used,	9
Dry dusting,	10
Light surface not 20 per cent. of floor space, .....	.....
Light admitted in front of pupils,	4
Ventilation insufficient, .....	.....
Stove in room,	10
Stove not jacketed,	7
Steam or hot water, .....	.....
Furnace in cellar, .....	.....
Room not warm, .....	.....
Floors not warm, .....	.....

WATER SUPPLY

Hydrant or spigot in room,	1
Spigot in building or on ground,	1
Drilled well,	3
Dug well, .....	.....
Spring,	7
Surface drainage not excluded,	3
Nuisance within 100 feet, .....	.....
Menace on higher level, .....	.....
Cooler with spigot, .....	.....
Bucket not covered,	7
Not scalded daily,	9
Fresh supply not secured each session,	1
Individual cups not used,	8
Cups dipped in bucket,	8

GROUND POLLUTION

PRIVIES

One single, .....	.....
Approaches not screened,	7
Dividing fences not tight,	3
Bad repair, .....	.....
Not clean, .....	.....
Objectionable odor,	3
No vault, .....	.....
Vault not water tight,	7
Vault full,	1
Vault overflowing, .....	.....
Lime or ashes not used,	1
Surface drainage not excluded,	7

URINALS AND FLUSH CLOSETS

Not properly vented, .....	.....
Not clean, .....	.....
Objectionable odor, .....	.....
Not sufficiently ventilated, .....	.....

FULTON COUNTY.

No. schools inspected,	17
No. school insanitary,	17
No. schools sanitary, .....	.....

SCHOOL BUILDING

Rooms and hall unclean, .....	.....
Sawdust and antiseptics not used,	16
Dry dusting,	16
Light surface not 20 per cent. of floor space,	8
Light admitted in front of pupils, .....	.....
Ventilation insufficient,	15
Stove in room,	14
Stove not jacketed, .....	.....
Steam or hot water, .....	.....
Furnace in cellar, .....	.....
Room not warm, .....	.....
Floors not warm, .....	.....

WATER SUPPLY

Hydrant or spigot in room, .....	.....
Spigot in building or on ground, .....	.....
Drilled well,	3
Dug well,	4
Spring,	9
Surface drainage not excluded, .....	.....
Nuisance within 100 feet, .....	.....
Menace on higher level, .....	.....
Cooler with spigot, .....	.....
Bucket not covered,	3
Not scalded daily, .....	.....
Fresh supply not secured each session, .....	.....
Individual cups not used,	16
Cups dipped in bucket,	15

GROUND POLLUTION

PRIVIES

One single, .....	.....
Approaches not screened,	13
Dividing fences not tight, .....	.....
Bad repair,	1
Not clean,	14
Objectionable odor,	14
No vault,	7
Vault not water tight, .....	.....
Vault full, .....	.....
Vault overflowing, .....	.....
Lime or ashes not used, .....	.....
Surface drainage not excluded, .....	.....

URINALS AND FLUSH CLOSETS

Not properly vented, .....	.....
Not clean, .....	.....
Objectionable odor, .....	.....
Not sufficiently ventilated, .....	.....

FRANKLIN COUNTY.

No. schools inspected,	42
No. schools insanitary,	42
No. schools sanitary, .....	.....

SCHOOL BUILDING

Rooms and halls unclean, .....	.....
Sawdust and antiseptics not used,	37
Dry dusting,	34
Light surface not 20 per cent. of floor space,	34
Light admitted in front of pupils, .....	.....
Ventilation insufficient, .....	.....
Stove in room,	37
Stove not jacketed, .....	.....

Steam or hot water, .....	.....
Furnace in cellar,	3
Room not warm, .....	.....
Floors not warm, .....	.....

WATER SUPPLY

Hydrant or spigot in room,	1
Spigot in building or on ground, .....	.....
Drilled well,	2
Dug well, .....	.....
Spring,	28
Surface drainage not excluded,	5
Nuisance within 100 feet, .....	.....
Menace on higher level, .....	.....
Cooler with spigot,	24
Bucket not covered,	7
Not scalded daily,	15
Fresh supply not secured each session,	1
Individual cups not used,	16
Cups dipped in bucket,	15

GROUND POLLUTION

PRIVIES

One single, .....	.....
Approaches not screened,	10
Dividing fences not tight,	16
Bad repair, .....	.....
Not clean,	36
Objectionable odor,	31
No vault,	28
Vault not water tight, .....	.....
Vault full, .....	.....
Vault overflowing, .....	.....
Lime or ashes not used, .....	.....
Surface drainage not excluded,	3

URINALS AND FLUSH CLOSETS

Not properly vented, .....	.....
Not clean, .....	.....
Objectionable odor, .....	.....
Not sufficiently ventilated, .....	.....

CLEARFIELD COUNTY.

No. schools inspected,	128
No. schools insanitary,	117
No. schools sanitary,	11

SCHOOL BUILDING

Rooms and halls unclean,	32
Sawdust and antiseptics not used,	110
Dry dusting,	105
Light surface not 20 per cent. of floor space,	29
Light admitted in front of pupils,	9
Ventilation insufficient,	15
Stove in room,	100
Stove not jacketed,	33
Steam or hot water,	11
Furnace in cellar,	21
Room not warm,	9
Floors not warm,	22

WATER SUPPLY

Hydrant or spigot in room,	1
Spigot in building or on ground,	9
Drilled well,	15
Dug well,	34
Spring,	53
Surface drainage not excluded,	24
Nuisance within 100 feet,	11
Menace on higher level,	10
Cooler with spigot,	12

Bucket not covered,	44
Not scalded daily,	75
Fresh supply not secured each session,	5
Individual cups not used,	89
Cups dipped in bucket,	81

GROUND POLLUTION,	1
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PRIVIES

One single,	12
Approaches not screened,	55
Dividing fences not tight,	48
Bad repair,	9
Not clean,	49
Objectionable odor,	40
No vault,	19
Vault not water tight,	26
Vault full,	24
Vault overflowing,	13
Lime or ashes not used,	56
Surface drainage not excluded,	33

URINALS AND FLUSH CLOSETS

Not properly vented,	1
Not clean,	3
Objectionable odor,	2
Not sufficiently ventilated,	2

HUNTINGDON COUNTY.

No. schools inspected,	45
No. schools insanitary,	45
No. schools sanitary,	

SCHOOL BUILDING

Rooms and halls unclean,	2
Sawdust and antiseptics not used,	39
Dry dusting,	35
Light surface not 20 per cent. of floor space,	1
Light admitted in front of pupils,	12
Ventilation insufficient,	3
Stove in room,	45
Stove not jacketed,	23
Steam or hot water,	
Furnace in cellar,	
Room not warm,	
Floors not warm,	7

WATER SUPPLY

Hydrant or spigot in room,	
Spigot in building or on ground,	2
Drilled well,	12
Dug well,	30
Spring,	22
Surface drainage not excluded,	3
Nuisance within 100 ft.,	4
Menace on higher level,	2
Cooler with spigot,	9
Bucket not covered,	22
Not scalded daily,	1
Fresh supply not secured each session,	42
Individual cups not used,	37
Cups dipped in bucket,	

GROUND POLLUTION,	2
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PRIVIES

One single,	16
Approaches not screened,	29
Dividing fences not tight,	8
Bad repair,	3

Not clean,	18
Objectionable odor,	21
No vault,	5
Vault not water tight,	15
Vault full,	1
Vault overflowing,	1
Lime or ashes not used,	18
Surface drainage not excluded,	23

URINALS AND FLUSH CLOSETS

Not properly vented,	
Not clean,	
Objectionable odor,	
Not sufficiently ventilated,	

INDIANA COUNTY.

No. schools inspected,	36
No. schools insanitary,	33
No. schools sanitary,	3

SCHOOL BUILDING

Rooms and halls unclean,	1
Sawdust and antiseptics not used,	35
Dry dusting,	32
Light surface not 20 per cent. of floor space,	11
Light admitted in front of pupils,	3
Ventilation insufficient,	10
Stove in room,	35
Stove not jacketed,	6
Steam or hot water,	
Furnace in cellar,	3
Room not warm,	2
Floors not warm,	2

WATER SUPPLY

Hydrant or spigot in room,	2
Spigot in building or on ground,	2
Drilled well,	10
Dug well,	4
Spring,	20
Surface drainage not excluded,	14
Nuisance within 100 ft.,	2
Menace on higher level,	2
Cooler with spigot,	
Bucket not covered,	17
Not scalded daily,	30
Fresh supply not secured each session,	1
Individual cups not used,	36
Cups dipped in bucket,	30

GROUND POLLUTION

PRIVIES

One single,	
Approaches not screened,	22
Dividing fences not tight,	16
Bad repair,	7
Not clean,	5
Objectionable odor,	5
No vault,	13
Vault not water tight,	16
Vault full,	14
Vault overflowing,	1
Lime or ashes not used,	10
Surface drainage not excluded,	16

URINALS AND FLUSH CLOSETS

Not properly vented,	
Not clean,	
Objectionable odor,	
Not sufficiently ventilated,	

JEFFERSON COUNTY.

No. schools inspected,	23
No. schools insanitary,	14
No. schools sanitary,	9

SCHOOL BUILDING

Rooms and halls unclean,	8
Sawdust and antiseptics not used,	
Dry dusting,	
Light surface not 20 per cent. of floor space,	34
Light admitted in front of pupils,	9
Ventilation insufficient,	13
Stove in room,	0
Stove not jacketed,	0
Steam or hot water,	4
Furnace in cellar,	
Room not warm,	
Floors not warm,	

WATER SUPPLY

Hydrant or spigot in room,	1
Spigot in building or on ground,	10
Drilled well,	8
Dug well,	4
Spring,	1
Surface drainage not excluded,	1
Nuisance within 100 ft.,	
Menace on higher level,	
Cooler with spigot,	
Bucket not covered,	4
Not scalded daily,	1
Fresh supply not secured each session,	11
Individual cups not used,	
Cups dipped in bucket,	

GROUND POLLUTION

PRIVIES

One single,	3
Approaches not screened,	5
Dividing fences not tight,	5
Bad repair,	3
Not clean,	4
Objectionable odor,	4
No vault,	
Vault not water tight,	1
Vault full,	
Vault overflowing,	0
Lime or ashes not used,	
Surface drainage not excluded,	

URINALS AND FLUSH CLOSETS

Not properly vented,	
Not clean,	
Objectionable odor,	
Not sufficiently ventilated,	

JUNIATA COUNTY.

No. schools inspected,	33
No. schools insanitary,	33
No. schools sanitary,	

SCHOOL BUILDING

Rooms and halls unclean,	39
Sawdust and antiseptics not used,	29
Dry dusting,	6
Light surface not 20 per cent. of floor space,	15
Light admitted in front of pupils,	
Ventilation insufficient,	36
Stove in room,	11
Stove not jacketed,	
Steam or hot water,	
Furnace in cellar,	
Room not warm,	
Floors not warm,	

WATER SUPPLY

Hydrant or spigot in room,	7
Spigot in building or on ground,	
Drilled well,	9
Dug well,	12
Spring,	11
Surface drainage not excluded,	4
Nuisance within 100 ft.,	3
Menace on higher level,	1
Cooler with spigot,	4
Bucket not covered,	21
Not scalded daily,	28
Fresh supply not secured each session,	2
Individual cups not used,	25
Cups dipped in bucket,	16

GROUND POLLUTION

PRIVIES

One single,	
Approaches not screened,	16
Dividing fences not tight,	17
Bad repair,	1
Not clean,	9
Objectionable odor,	10
No vault,	16
Vault not water tight,	3
Vault full,	1
Vault overflowing,	1
Lime or ashes not used,	3
Surface drainage not excluded,	6

URINALS AND FLUSH CLOSETS

Not properly vented,	
Not clean,	
Objectionable odor,	
Not sufficiently ventilated,	

LACKAWANNA COUNTY.

No. schools inspected,	38
No. schools insanitary,	31
No. schools sanitary,	7

SCHOOL BUILDING

Rooms and halls unclean,	3
Sawdust and antiseptics not used,	28
Dry dusting,	31
Light surface not 20 per cent. of floor space,	9
Light admitted in front of pupils,	3
Ventilation insufficient,	4
Stove in room,	20
Stove not jacketed,	3
Steam or hot water,	16
Furnace in cellar,	4
Room not warm,	3
Floors not warm,	5

WATER SUPPLY

Hydrant or spigot in room,	1
Spigot in building or on ground,	12
Drilled well,	
Dug well,	8
Spring,	12
Surface drainage not excluded,	9
Nuisance within 100 ft.,	1
Menace on higher level,	4
Cooler with spigot,	4
Bucket not covered,	16
Not scalded daily,	20
Fresh supply not secured each session,	7
Individual cups not used,	23
Cups dipped in bucket,	14

GROUND POLLUTION,	6
PRIVIES	
One single,	16
Approaches not screened,	12
Bad repair,	17
Not clean,	10
Objectionable odor,	16
No vault,	
Vault not water tight,	
Vault full,	
Vault overflowing,	
Lime and ashes not used,	13
Surface drainage not excluded,	13
URINALS AND FLUSH CLOSETS	
Not properly vented,	1
Not clean,	2
Objectionable odor,	2
Not sufficiently ventilated,	1

LANCASTER COUNTY.

No. schools inspected,	113
No. schools insanitary,	84
No. schools sanitary,	29
SCHOOL BUILDING	
Rooms and halls unclean,	3
Sawdust and antiseptics not used,	73
Dry dusting,	76
Light surface not 20 per cent. of floor space,	41
Light admitted in front of pupils,	17
Ventilation insufficient,	86
Stove in room,	57
Stove not jacketed,	1
Steam or hot water,	1
Furnace in cellar,	34
Room not warm,	13
Floors not warm,	8
WATER SUPPLY	
Hydrant or spigot in room,	2
Spigot in building or on ground,	4
Drilled well,	16
Dug well,	71
Spring,	13
Surface drainage not excluded,	2
Nuisance within 100 ft.,	3
Menace on higher level,	
Cooler with spigot,	69
Bucket not covered,	11
Not scalded daily,	21
Fresh supply not secured each session,	
Individual cups not used,	42
Cups dipped in bucket,	13
GROUND POLLUTION	
PRIVIES	
One single,	3
Approaches not screened,	2
Dividing fences not tight,	6
Bad repair,	6
Not clean,	18
Objectionable odor,	28
No vault,	43
Vault not water tight,	23
Vault full,	15
Vault overflowing,	
Lime or ashes not used,	27
Surface drainage not excluded,	3
URINALS AND FLUSH CLOSETS	
Not properly vented,	
Not clean,	
Objectionable odor,	
Not sufficiently ventilated,	

LAWRENCE COUNTY.

No. schools inspected,	72
No. schools insanitary,	72
No. schools sanitary,	

SCHOOL BUILDING

Rooms and halls unclean,	10
Sawdust and antiseptics not used,	70
Dry dusting,	67
Light surface not 20 per cent. of floor space,	19
Light admitted in front of pupils,	3
Ventilation insufficient,	38
Stove in room,	60
Stove not jacketed,	63
Steam or hot water,	
Furnace in cellar,	8
Room not warm,	12
Floors not warm,	14

WATER SUPPLY

Hydrant or spigot in room,	2
Spigot in building or on ground,	2
Drilled well,	32
Dug well,	18
Spring,	20
Surface drainage not excluded,	23
Nuisance within 100 ft.,	13
Menace on higher level,	7
Cooler with spigot,	11
Bucket not covered,	50
Not scalded daily,	56
Fresh supply not secured each session,	3
Individual cups not used,	54
Cups dipped in bucket,	50

GROUND POLLUTION,	6
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PRIVIES

One single,	
Approaches not screened,	53
Dividing fences not tight,	51
Bad repair,	29
Not clean,	34
Objectionable odor,	35
No vault,	4
Vault not water tight,	47
Vault full,	12
Vault overflowing,	
Lime or ashes not used,	65
Surface drainage not excluded,	39

URINALS AND FLUSH CLOSETS

Not properly vented,	
Not clean,	3
Objectionable odor,	2
Not sufficiently ventilated,	3

LEBANON COUNTY.

No. schools inspected,	18
No. schools insanitary,	18
No. schools sanitary,	

SCHOOL BUILDING

Rooms and halls unclean,	
Sawdust and antiseptics not used,	19
Dry dusting,	15
Light surface not 20 per cent. of floor space,	8
Light admitted in front of pupils,	4
Ventilation insufficient,	14
Stove in room,	18
Stove not jacketed,	

Steam or hot water,	1
Furnace in cellar,	2
Room not warm,	
Floors not warm,	

WATER SUPPLY

Hydrant or spigot in room,	2
Spigot in building or on ground,	1
Drilled well,	3
Dug well,	3
Spring,	
Surface drainage not excluded,	4
Nuisance within 100 ft.,	4
Menace on higher level,	
Cooler with spigot,	14
Bucket not covered,	9
Not scalded daily,	1
Fresh supply not secured each session,	16
Individual cups not used,	16
Cups dipped in bucket,	

GROUND POLLUTION

PRIVIES

One single,	14
Approaches not screened,	7
Dividing fences not tight,	4
Bad repair,	5
Not clean,	15
Objectionable odor,	
No vault,	11
Vault not water tight,	10
Vault full,	1
Vault overflowing,	9
Lime or ashes not used,	4
Surface drainage not excluded,	

URINALS AND FLUSH CLOSETS

Not properly vented,	1
Not clean,	
Objectionable odor,	
Not sufficiently ventilated,	1

LEHIGH COUNTY.

No. schools inspected,	73
No. schools insanitary,	70
No. schools sanitary,	3

SCHOOL BUILDING

Rooms and halls unclean,	10
Sawdust and antiseptics not used,	44
Dry dusting,	22
Light surface not 20 per cent. of floor space,	6
Light admitted in front of pupils,	5
Ventilation insufficient,	56
Stove in room,	2
Stove not jacketed,	1
Steam or hot water,	11
Furnace in cellar,	
Room not warm,	
Floors not warm,	1

WATER SUPPLY

Hydrant or spigot in room,	4
Spigot in building or on ground,	3
Drilled well,	2
Dug well,	27
Spring,	10
Surface drainage not excluded,	
Nuisance within 100 ft.,	8
Menace on higher level,	4
Cooler with spigot,	18

Bucket not covered,	30
Not scalded daily,	32
Fresh supply not secured each session,	1
Individual cups not used,	62
Cups dipped in bucket,	7

GROUND POLLUTION,	1
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PRIVIES

One single,	1
Approaches not screened,	37
Dividing fences not tight,	24
Bad repair,	1
Not clean,	19
Objectionable odor,	27
No vault,	11
Vault not water tight,	19
Vault full,	2
Vault overflowing,	4
Lime or ashes not used,	20
Surface drainage not excluded,	20

URINALS AND FLUSH CLOSETS

Not properly vented,	
Not clean,	
Objectionable odor,	
Not sufficiently ventilated,	

LUZERNE COUNTY.

No. schools inspected,	44
No. schools insanitary,	44
No. schools sanitary,	

SCHOOL BUILDING

Rooms and halls unclean,	2
Sawdust and antiseptics not used,	23
Dry dusting,	37
Light surface not 20 per cent. of floor space,	6
Light admitted in front of pupils,	8
Ventilation insufficient,	25
Stove in room,	29
Stove not jacketed,	1
Steam or hot water,	1
Furnace in cellar,	13
Room not warm,	6
Floors not warm,	3

WATER SUPPLY

Hydrant or spigot in room,	5
Spigot in building or on ground,	9
Drilled well,	4
Dug well,	8
Spring,	14
Surface drainage not excluded,	
Nuisance within 100 ft.,	2
Menace on higher level,	2
Cooler with spigot,	3
Bucket not covered,	25
Not scalded daily,	22
Fresh supply not secured each session,	
Individual cups not used,	24
Cups dipped in bucket,	25

GROUND POLLUTION,	2
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PRIVIES

One single,	
Approaches not screened,	17
Dividing fences not tight,	2
Bad repair,	2
Not clean,	14

Objectionable odor,	9
No vault,	1
Vault not water tight,	15
Vault full,	
Vault overflowing,	
Lime or ashes not used,	4
Surface drainage not excluded,	1

URINALS AND FLUSH CLOSETS

Not properly vented,	1
Not clean,	
Objectionable odor,	
Not sufficiently ventilated,	1

LYCOMING COUNTY.

No. schools inspected,	117
No. schools insanitary,	97
No. schools sanitary,	20

SCHOOL BUILDING

Rooms and halls unclean,	5
Sawdust and antiseptics not used,	109
Dry dusting,	89
Light surface not 20 per cent. of floor space,	27
Light admitted in front of pupils,	10
Ventilation insufficient,	8
Stove in room,	95
Stove not jacketed,	50
Steam or hot water,	8
Furnace in cellar,	18
Room not warm,	17
Floors not warm,	20

WATER SUPPLY

Fountains,	4
Hydrant or spigot in room,	2
Spigot in building or on ground,	6
Drilled well,	45
Dug well,	19
Spring,	40
Surface drainage not excluded,	45
Nuisance within 100 ft.,	13
Menace on higher level,	18
Cooler with spigot,	36
Buckets not covered,	41
Not scalded daily,	74
Fresh supply not secured each session,	18
Individual cups not used,	85
Cups dipped in bucket,	58
Creek water,	1

GROUND POLLUTION,	2
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PRIVIES

One single,	7
Approaches not screened,	41
Dividing fences not tight,	42
Bad repair,	8
Not clean,	35
Objectionable odor,	36
No vault,	37
Vault not water tight,	31
Vault full,	19
Vault overflowing,	12
Lime or ashes not used,	70
Surface drainage not excluded,	55

URINALS AND FLUSH CLOSETS

Not properly vented,	
Not clean,	
Objectionable odor,	
Not sufficiently ventilated,	

McKEAN COUNTY.

No. schools inspected,	9
No. schools insanitary,	8
No. schools sanitary,	1

SCHOOL BUILDING

Rooms and halls unclean,	
Sawdust and antiseptics not used,	8
Dry dusting,	4
Light surface not 20 per cent. of floor space,	2
Light admitted in front of pupils,	
Ventilation insufficient,	
Stove in room,	8
Stove not jacketed,	4
Steam or hot water,	
Furnace in cellar,	1
Room not warm,	0
Floors not warm,	

WATER SUPPLY

Hydrant or spigot in room,	
Spigot in building or on ground,	3
Drilled well,	
Dug well,	2
Spring,	3
Surface drainage not excluded,	
Nuisance within 100 ft.,	1
Menace on higher level,	
Cooler with spigot,	2
Bucket not covered,	1
Not scalded daily,	4
Fresh supply not secured each session,	
Individual cups not used,	3
Cups dipped in bucket,	3

GROUND POLLUTION

PRIVIES

One single,	
Approaches not screened,	8
Dividing fences not tight,	3
Bad repair,	2
Not clean,	4
Objectionable odor,	2
No vault,	5
Vault not water tight,	4
Vault full,	5
Vault overflowing,	1
Lime or ashes not used,	5
Surface drainage not excluded,	5

URINALS AND FLUSH CLOSETS

Not properly vented,	
Not clean,	
Objectionable odor,	
Not sufficiently ventilated,	

MERCER COUNTY.

No. schools inspected,	74
No. schools insanitary,	69
No. schools sanitary,	5

SCHOOL BUILDING

Rooms and halls unclean,	4
Sawdust and antiseptics not used,	71
Dry dusting,	64
Light surface not 20 per cent. of floor space,	30
Light admitted in front of pupils,	14
Ventilation insufficient,	21
Stove in room,	70
Stove not jacketed,	41
Steam or hot water,	3
Furnace in cellar,	1
Room not warm,	5
Floors not warm,	5

WATER SUPPLY

Drinking fountain,	2
Hydrant or spigot in room,	1
Spigot in building or on ground,	34
Drilled well,	13
Dug well,	21
Spring,	30
Surface drainage not excluded,	6
Nuisance within 100 ft.,	4
Menace on higher level,	1
Cooler with spigot,	62
Bucket not covered,	62
Not scalded daily,	17
Fresh supply not secured each session,	61
Individual cups not used,	57
Cups dipped in bucket,	

GROUND POLLUTION,	10
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PRIVIES

One single,	1
Approaches not screened,	52
Dividing fences not tight,	34
Bad repair,	35
Not clean,	28
Objectionable odor,	31
No vault,	26
Vault not water tight,	57
Vault full,	6
Vault overflowing,	7
Lime or ashes not used,	48
Surface drainage not excluded,	45

URINALS AND FLUSH CLOSETS

Not properly vented,	
Not clean,	
Objectionable odor,	
Not sufficiently ventilated,	

MIFFLIN COUNTY.

No. schools inspected,	15
No. schools insanitary,	9
No. schools sanitary,	6

SCHOOL BUILDING

Rooms and halls unclean,	2
Sawdust and antiseptics not used,	11
Dry dusting,	4
Light surface not 20 per cent. of floor space,	2
Light admitted in front of pupils,	2
Ventilation insufficient,	6
Stove in room,	7
Stove not jacketed,	
Steam or hot water,	5
Furnace in cellar,	6
Room not warm,	
Floors not warm,	

WATER SUPPLY

Hydrant or spigot in room,	1
Spigot in building or on ground,	
Drilled well,	2
Dug well,	2
Spring,	2
Surface drainage not excluded,	
Nuisance within 100 feet,	1
Menace on higher level,	1
Cooler with spigot,	1
Bucket not covered,	1
Not scalded daily,	
Fresh supply not secured each session,	
Individual cups not used,	4
Cups dipped in bucket,	4

GROUND POLLUTION

PRIVIES

One single,	1
Approaches not screened,	2
Dividing fences not tight,	3
Bad repair,	7
Not clean,	1
Objectionable odor,	1
No vault,	1
Vault not water tight,	1
Vault full,	1
Vault overflowing,	1
Lime or ashes not used,	1
Surface drainage not excluded,	1

URINALS AND FLUSH CLOSETS

Not properly vented,	1
Not clean,	1
Objectionable odor,	1
Not sufficiently ventilated,	1

MONROE COUNTY.

No. schools inspected,	46
No. schools insanitary,	45
No. schools sanitary,	1

SCHOOL BUILDING

Rooms and halls unclean,	1
Sawdust and antiseptics not used,	37
Dry dusting,	31
Light surface not 20 per cent. of floor space,	15
Light admitted in front of pupils,	21
Ventilation insufficient,	33
Stove in room,	44
Stove not jacketed,	1
Steam or hot water,	1
Furnace in cellar,	1
Room not warm,	1
Floors not warm,	1

WATER SUPPLY

Hydrant or spigot in room,	1
Spigot in building or on ground,	12
Drilled well,	8
Dug well,	21
Spring,	1
Surface drainage not excluded,	1
Nuisance within 100 feet,	1
Menace on higher level,	16
Cooler with spigot,	1
Bucket not covered,	44
Not scalded daily,	33
Fresh supply not secured each session,	1
Individual cups not used,	1
Cups dipped in bucket,	1

GROUND POLLUTION

PRIVIES

One single,	43
Approaches not screened,	7
Dividing fences not tight,	1
Bad repair,	3
Not clean,	16
Objectionable odor,	2
No vault,	2
Vault not water tight,	2
Vault full,	2
Vault overflowing,	1
Lime or ashes not used,	1
Surface drainage not excluded,	1

URINALS AND FLUSH CLOSETS

Not properly vented,	1
Not clean,	1
Objectionable odor,	1
Not sufficiently ventilated,	1

MONTGOMERY COUNTY.

No. schools inspected,	52
No. schools insanitary,	21
No. schools sanitary,	31

SCHOOL BUILDING

Rooms and halls unclean,	1
Sawdust and antiseptics not used,	34
Dry dusting,	45
Light surface not 20 per cent. of floor space,	5
Light admitted in front of pupils,	6
Ventilation insufficient,	19
Stove in room,	22
Stove not jacketed,	21
Steam or hot water,	28
Furnace in cellar,	1
Room not warm,	1
Floors not warm,	1

WATER SUPPLY

Hydrant or spigot in room,	11
Spigot in building or on ground,	8
Drilled well,	29
Dug well,	5
Spring,	1
Surface drainage not excluded,	5
Nuisance within 100 feet,	2
Menace on higher level,	5
Cooler with spigot,	4
Bucket not covered,	2
Not scalded daily,	26
Fresh supply not secured each session,	6
Individual cups not used,	6
Cups dipped in bucket,	6

GROUND POLLUTION,	2
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PRIVIES

One single,	9
Approaches not screened,	13
Dividing fences not tight,	12
Bad repair,	4
Not clean,	8
Objectionable odor,	15
No vault,	11
Vault not water tight,	8
Vault full,	1
Vault overflowing,	4
Lime or ashes not used,	4
Surface drainage not excluded,	1

URINALS AND FLUSH CLOSETS

Not properly vented,	1
Not clean,	1
Objectionable odor,	1
Not sufficiently ventilated,	1

NORTHAMPTON COUNTY.

No. schools inspected,	44
No. schools insanitary,	35
No. schools sanitary,	9

SCHOOL BUILDING

Rooms and halls unclean,	2
Sawdust and antiseptics not used,	40
Dry dusting,	44
Light surface not 20 per cent. of floor space,	12
Light admitted in front of pupils,	14
Ventilation insufficient,	35
Stove in room,	6
Stove not jacketed,	1
Steam or hot water,	1
Furnace in cellar,	10
Room not warm,	2
Floors not warm,	4

WATER SUPPLY

Hydrant or spigot in room,	2
Spigot in building or on ground,	1
Drilled well,	4
Dug well,	33
Spring,	3
Surface drainage not excluded,	11
Nuisance within 100 feet,	3
Menace on higher level,	8
Cooler with spigot,	12
Bucket not covered,	24
Not scalded daily,	1
Fresh supply not secured each session,	36
Individual cups not used,	11
Cups dipped in bucket,	

GROUND POLLUTION

PRIVIES

One single,	17
Approaches not screened,	10
Dividing fences not tight,	4
Bad repair,	13
Not clean,	31
Objectionable odor,	3
No vault,	10
Vault not water tight,	3
Vault full,	10
Vault overflowing,	30
Lime or ashes not used,	6
Surface drainage not excluded,	

URINALS AND FLUSH CLOSETS

Not properly vented,	1
Not clean,	1
Objectionable odor,	1
Not sufficiently ventilated,	1

NORTHUMBERLAND COUNTY.

No. schools inspected,	32
No. schools insanitary,	27
No. schools sanitary,	5

SCHOOL BUILDING

Rooms and halls unclean,	4
Sawdust and antispectics not used,	20
Dry dusting,	25
Light surface not 20 per cent. of floor space,	8
Ventilation insufficient,	7
Stove in room,	18
Stove not jacketed,	2
Steam or hot water,	3
Furnace in cellar,	14
Room not warm,	1
Floors not warm,	1

WATER SUPPLY

Hydrant or spigot in room,	2
Spigot in building or on ground,	3
Drilled well,	13
Dug well,	4
Spring,	1
Surface drainage not excluded,	2
Nuisance within 100 feet,	1
Menace on higher level,	10
Cooler with spigot,	10
Bucket not covered,	10
Not scalded daily,	1
Fresh supply not secured each session,	10
Individual cups not used,	12
Cups dipped in bucket,	

GROUND POLLUTION,	1
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PRIVIES

One single,	9
Approaches not screened,	

Dividing fences not tight,	5
Bad repair,	2
Not clean,	6
Objectionable odor,	6
No vault,	3
Vault not water tight,	1
Vault full,	1
Vault overflowing,	1
Lime or ashes not used,	1
Surface drainage not excluded,	2

URINALS AND FLUSH CLOSETS

Not properly vented,	1
Not clean,	1
Objectionable odor,	1
Not sufficiently ventilated,	1

PERRY COUNTY.

No. schools inspected,	25
No. schools insanitary,	17
No. schools sanitary,	8

SCHOOL BUILDING

Rooms and halls unclean,	22
Sawdust and antiseptics not used,	22
Dry dusting,	4
Light surface not 20 per cent. of floor space,	4
Light admitted in front of pupils,	14
Ventilation insufficient,	19
Stove in room,	4
Stove not jacketed,	4
Steam or hot water,	4
Furnace in cellar,	4
Room not warm,	4
Floors not warm,	4

WATER SUPPLY

Hydrant or spigot in room,	2
Spigot in building or on ground,	1
Drilled well,	14
Dug well,	6
Spring,	1
Surface drainage not excluded,	8
Nuisance within 100 feet,	5
Menace on higher level,	5
Cooler with spigot,	1
Bucket not covered,	1
Not scalded daily,	1
Fresh supply not secured each session,	14
Individual cups not used,	7
Cups dipped in bucket,	7

GROUND POLLUTION

PRIVIES

One single,	13
Approaches not screened,	1
Dividing fences not tight,	1
Bad repair,	3
Not clean,	3
Objectionable odor,	3
No vault,	3
Vault not water tight,	3
Vault full,	3
Vault overflowing,	3
Lime or ashes not used,	3
Surface drainage not excluded,	3

URINALS AND FLUSH CLOSETS

Not properly vented,	1
Not clean,	1
Objectionable odor,	1
Not sufficiently ventilated,	1

PIKE COUNTY.

No. schools inspected,	9
No. schools insanitary,	8
No. schools sanitary,	1

SCHOOL BUILDING

Rooms and halls unclean, .....	..
Sawdust and antiseptics not used,	8
Dry dusting,	7
Light surface not 20 per cent. of floor space,	3
Light admitted in front of pupils,	3
Ventilation insufficient,	5
Stove in room, .....	..
Stove not jacketed, .....	..
Steam or hot water, .....	..
Furnace in cellar, .....	..
Room not warm, .....	..
Floors not warm, .....	..

WATER SUPPLY

Hydrant or spigot in room, .....	..
Spigot in building or on ground, .....	..
Drilled well, .....	..
Dug well,	4
Spring,	6
Surface drainage not excluded,	1
Nuisance within 100 feet,	1
Menace on higher level,	1
Cooler with spigot,	1
Bucket not covered, .....	..
Not scalded daily, .....	..
Fresh supply not secured each session, .....	..
Individual cups not used,	8
Cups dipped in buckets,	7

GROUND POLLUTION

PRIVIES

One single, .....	..
Approaches not screened,	7
Dividing fences not tight,	1
Bad repair, .....	..
Not clean,	1
Objectionable odor,	2
No vault,	3
Vault not water tight,	1
Vault full, .....	..
Vault overflowing, .....	..
Lime or ashes not used, .....	..
Surface drainage not excluded, .....	..

URINALS AND FLUSH CLOSETS

Not properly vented, .....	..
Not clean, .....	..
Objectionable odor, .....	..
Not sufficiently ventilated, .....	..

POTTER COUNTY.

No. schools inspected,	58
No. schools insanitary,	36
No. schools sanitary,	22

SCHOOL BUILDING

Rooms and halls unclean, .....	..
Sawdust and antiseptics not used,	49
Dry dusting,	44
Light surface not 20 per cent. of floor space,	4
Light admitted in front of pupils,	6
Ventilation insufficient,	24
Stove in room,	48
Stove not jacketed,	32
Steam or hot water,	1
Furnace in cellar,	7
Room not warm, .....	..
Floors not warm, .....	..

WATER SUPPLY

Hydrant or spigot in room,	4
Spigot in building or on ground,	2
Drilled well,	10
Dug well,	1
Spring,	39
Surface drainage not excluded,	
Nuisance within 100 feet,	
Menace on higher level,	1
Cooler with spigot,	10
Bucket not covered,	11
Not scalded daily,	7
Fresh supply not secured each session,	
Individual cups not used,	14
Cups dipped in bucket,	22

GROUND POLLUTION

PRIVIES

One single,	1
Approaches not screened,	35
Dividing fences not tight,	21
Bad repair,	8
Not clean,	22
Objectionable odor,	23
No vault,	21
Vault not water tight,	
Vault full,	3
Vault overflowing,	1
Lime or ashes not used,	7
Surface drainage not excluded,	

URINALS AND FLUSH CLOSETS

Not properly vented,	1
Not clean,	
Objectionable odor,	
Not sufficiently ventilated,	

SOMERSET COUNTY.

No. schools inspected,	47
No. schools insanitary,	45
No. schools sanitary,	2

SCHOOL BUILDING

Rooms and halls unclean,	42
Sawdust and antiseptics not used,	21
Dry dusting,	3
Light surface not 20 per cent. of floor space,	4
Light admitted in front of pupils,	7
Ventilation insufficient,	40
Stove in room,	8
Stove not jacketed,	2
Steam or hot water,	6
Furnace in cellar,	1
Room not warm,	3
Floors not warm,	

WATER SUPPLY

Hydrant or spigot in room,	
Spigot in building or on ground,	
Drilled well,	5
Dug well,	17
Spring,	23
Surface drainage not excluded,	27
Nuisance within 100 feet,	2
Menace on higher level,	1
Cooler with spigot,	
Bucket not covered,	39
Not scalded daily,	36
Fresh supply not secured each session,	
Individual cups not used,	44
Cups dipped in bucket,	38

GROUND POLLUTION,	1
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PRIVIES

One single,	36
Approaches not screened,	35
Dividing fences not tight,	1
Bad repair,	25
Not clean,	25
Objectionable odor,	9
No vault,	36
Vault not water tight,	11
Vault full,	13
Vault overflowing,	24
Lime or ashes not used,	37
Surface drainage not excluded,	

URINALS AND FLUSH CLOSETS

Not properly vented,	
Not clean,	
Objectionable odor,	
Not sufficiently ventilated,	

SCHUYLKILL COUNTY.

No. schools inspected,	171
No. schools insanitary,	156
No. schools sanitary,	15

SCHOOL BUILDING

Rooms and halls unclean,	16
Sawdust and antiseptics not used,	100
Dry dusting,	138
Light surface not 20 per cent. of floor space,	67
Light admitted in front of pupils,	39
Ventilation insufficient,	100
Stove in room,	96
Stove not jacketed,	5
Steam or hot water,	13
Furnace in cellar,	63
Room not warm,	10
Floors not warm,	12

WATER SUPPLY

Hydrant or spigot in room,	14
Spigot in building or on ground,	25
Drilled well,	14
Dug well,	45
Spring,	40
Surface drainage not excluded,	3
Nuisance within 100 feet,	30
Menace on higher level,	6
Cooler with spigot,	28
Bucket not covered,	23
Not scalded daily,	20
Fresh supply not secured each session,	
Individual cups not used,	110
Cups dipped in bucket,	87

GROUND POLLUTION

PRIVIES

One single,	
Approaches not screened,	104
Dividing fences not tight,	41
Bad repair,	15
Not clean,	36
Objectionable odor,	36
No vault,	45
Vault not water tight,	16
Vault full,	7
Vault overflowing,	1
Lime or ashes not used,	21
Surface drainage not excluded,	19

URINALS AND FLUSH CLOSETS

Not properly vented,	
Not clean,	
Objectionable odor,	
Not sufficiently ventilated,	

SNYDER COUNTY.

No. schools inspected,	6
No. schools insanitary,	5
No. schools sanitary,	1

SCHOOL BUILDING

Rooms and halls unclean,	6
Sawdust and antiseptics not used,	1
Dry dusting,	1
Light surface not 20 per cent. of floor space,	1
Light admitted in front of pupils,	1
Ventilation insufficient,	6
Stove in room,	6
Stove not jacketed,	4
Steam or hot water,	5
Furnace in cellar,	2
Room not warm,	1
Floors not warm,	1

WATER SUPPLY

Hydrant or spigot in room,	1
Spigot in building or on ground,	5
Drilled well,	5
Dug well,	5
Spring,	5
Surface drainage not excluded,	5
Nuisance within 100 feet,	5
Menace on higher level,	5
Cooler with spigot,	2
Bucket not covered,	5
Not scalded daily,	5
Fresh supply not secured each session,	5
Individual cups not used,	5
Cups dipped in bucket,	5

GROUND POLLUTION

PRIVIES

One single,	4
Approaches not screened,	4
Dividing fences not tight,	4
Bad repair,	5
Not clean,	5
Objectionable odor,	5
No vault,	5
Vault not water tight,	5
Vault full,	5
Vault overflowing,	5
Lime or ashes not used,	3
Surface drainage not excluded,	5

URINALS AND FLUSH CLOSETS

Not properly vented,	5
Not clean,	1
Objectionable odor,	5
Not sufficiently ventilated,	5

SULLIVAN COUNTY.

No. schools inspected,	34
No. schools insanitary,	34
No. schools sanitary,	1

SCHOOL BUILDING

Rooms and halls unclean,	32
Sawdust and antiseptics not used,	32
Dry dusting,	1
Light surface not 20 per cent. of floor space,	1
Light admitted in front of pupils,	1
Ventilation insufficient,	32
Stove in room,	3
Stove not jacketed,	3
Steam or hot water,	2
Furnace in cellar,	1
Room not warm,	1
Floors not warm,	1

WATER SUPPLY

Hydrant or spigot in room,	7
Spigot in building or on ground,	8
Drilled well,	18
Dug well,	1
Spring,	30
Surface drainage not excluded,	29
Nuisance within 100 feet,	30
Menace on higher level,	30
Cooler with spigot,	29
Bucket not covered,	30
Not scalded daily,	29
Fresh supply not secured each session,	30
Individual cups not used,	30
Cups dipped in bucket,	29

GROUND POLLUTION

PRIVIES

One single,	13
Approaches not screened,	13
Dividing fences not tight,	10
Bad repair,	16
Not clean,	14
Objectionable odor,	24
No vault,	9
Vault not water tight,	6
Vault full,	
Vault overflowing,	
Lime or ashes not used,	
Surface drainage not excluded,	

URINALS AND FLUSH CLOSETS

Not properly vented,	
Not clean,	
Objectionable odor,	
Not sufficiently ventilated,	

SUSQUEHANNA COUNTY.

No. schools inspected,	50
No. schools insanitary,	46
No. schools sanitary,	4

SCHOOL BUILDING

Rooms and halls unclean,	3
Sawdust and antiseptics not used,	43
Dry dusting,	47
Light surface not 20 per cent. of floor space,	16
Light admitted in front of pupils,	4
Ventilation insufficient,	37
Stove in room,	41
Stove not jacketed,	36
Steam or hot water,	2
Furnace in cellar,	7
Room not warm,	
Floors not warm,	

WATER SUPPLY

Hydrant or snigot in room,	4
Spigot in building or on ground,	1
Drilled well,	21
Dug well,	25
Spring,	4
Surface drainage not excluded,	6
Nuisance within 100 feet,	8
Menace on higher level,	5
Cooler with spigot,	12
Bucket not covered,	11
Not scalded daily,	5
Fresh supply not secured each session,	35
Individual cups not used,	31
Cups dipped in bucket,	

GROUND POLLUTION,	5
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PRIVIES

One single,	30
Approaches not screened,	7
Dividing fences not tight,	4
Bad repair,	25
Not clean,	30
Objectionable odor,	30
No vault,	2
Vault not water tight,	8
Vault full,	15
Vault overflowing,	11
Lime or ashes not used,	
Surface drainage not excluded,	

URINALS AND FLUSH CLOSETS

Not properly vented,	
Not clean,	
Objectionable odor,	
Not sufficiently ventilated,	

TIOGA COUNTY.

No. schools inspected,	65
No. schools insanitary,	58
No. schools sanitary,	7

SCHOOL BUILDING

Rooms and halls unclean,	8
Sawdust and antiseptics not used,	60
Dry dusting,	57
Light surface not 20 per cent. of floor space,	32
Light admitted in front of pupils,	11
Ventilation insufficient,	26
Stove in room,	56
Stove not jacketed,	45
Steam or hot water,	8
Furnace in cellar,	3
Room not warm,	26
Floors not warm,	29

WATER SUPPLY

Fountain,	2
Hydrant or spigot in room,	1
Spigot in building or on ground,	4
Drilled well,	12
Dug well,	15
Spring,	25
Surface drainage not excluded,	26
Nuisance within 100 feet,	11
Menace on higher level,	13
Cooler with spigot,	9
Bucket not covered,	35
Not scalded daily,	49
Fresh supply not secured each session,	4
Individual cups not used,	42
Cups dipped in bucket,	37

GROUND POLLUTION,

PRIVIES

One single,	3
Approaches not screened,	36
Dividing fences not tight,	23
Bad repair,	13
Not clean,	30
Objectionable odor,	31
No vault,	38
Vault not water tight,	48
Vault full,	13
Vault overflowing,	3
Lime or ashes not used,	43
Surface drainage not excluded,	50

URINALS AND FLUSH CLOSETS

Not properly vented, .....	.....
Not clean, .....	.....
Objectionable odor, .....	.....
Not sufficiently ventilated, .....	.....

UNION COUNTY.

No. schools inspected,	21
No. schools insanitary,	10
No. schools sanitary,	11

SCHOOL BUILDING

Rooms and halls unclean, .....	.....
Sawdust and antiseptics not used,	12
Dry dusting,	18
Light surface not 20 per cent. of floor space,	7
Light admitted in front of pupils, .....	.....
Ventilation insufficient,	11
Stove in room,	16
Stove not jacketed,	5
Steam or hot water, .....	.....
Furnace in cellar,	5
Room not warm, .....	.....
Floors not warm, .....	.....

WATER SUPPLY

Hydrant or spigot in room, .....	.....
Spigot in building or on ground,	4
Drilled well,	2
Dug well,	10
Spring,	5
Surface drainage not excluded, .....	.....
Nuisance within 100 feet, .....	.....
Menace on higher level, .....	.....
Cooler with spigot,	14
Bucket not covered,	1
Not scalded daily, .....	.....
Fresh supply not secured each session, .....	.....
Individual cups not used,	10
Cups dipped in bucket,	2

GROUND POLLUTION

PRIVIES

One single, .....	.....
Approaches not screened,	2
Dividing fences not tight, .....	.....
Bad repair,	1
Not clean,	1
Objectionable odor, .....	.....
No vault,	7
Vault not water tight, .....	.....
Vault full,	1
Vault overflowing, .....	.....
Lime or ashes not used,	6
Surface drainage not excluded,	2

URINALS AND FLUSH CLOSETS

Not properly vented, .....	.....
Not clean, .....	.....
Objectionable odor, .....	.....
Not sufficiently ventilated, .....	.....

VENANGO COUNTY.

No. schools inspected,	65
No. schools insanitary,	54
No. schools sanitary,	11

SCHOOL BUILDING

Rooms and halls unclean, .....	.....
Sawdust and antiseptics not used,	60
Dry dusting,	38

Light surface not 20 per cent. of floor space,	26
Light admitted in front of pupils,	1
Ventilation insufficient,	26
Stove in room,	59
Stove not jacketed,	11
Steam or hot water,	1
Furnace in cellar,	2
Room not warm,	
Floors not warm,	

WATER SUPPLY

Hydrant or spigot in room,	
Spigot in building or on ground,	
Drilled well,	17
Dug well,	12
Spring,	36
Surface drainage not excluded,	
Nuisance within 100 feet,	1
Menace on higher level,	1
Cooler with spigot,	9
Bucket not covered,	39
Not scalded daily,	28
Fresh supply not secured each session,	3
Individual cups not used,	45
Cups dipped in bucket,	46

GROUND POLLUTION

PRIVIES

One single,	7
Approaches not screened,	26
Dividing fences not tight,	2
Bad repair,	1
Not clean,	12
Objectionable odor,	9
No vault,	19
Vault not water tight,	1
Vault full,	16
Vault overflowing,	1
Lime or ashes not used,	6
Surface drainage not excluded,	5

URINALS AND FLUSH CLOSETS,

Not properly vented,	1
Not clean,	
Objectionable odor,	
Not sufficiently ventilated,	

WARREN COUNTY.

No. schools inspected,	51
No. schools insanitary,	48
No. schools sanitary,	3

SCHOOL BUILDING

Rooms and halls unclean,	2
Sawdust and antiseptics not used,	46
Dry dusting,	40
Light surface not 20 per cent. of floor space,	18
Light admitted in front of pupils,	11
Ventilation insufficient,	31
Stove in room,	43
Stove not jacketed,	33
Steam or hot water,	
Furnace in cellar,	5
Room not warm,	12
Floors not warm,	13

WATER SUPPLY

Hydrant or spigot in room,	
Spigot in building or on ground,	2
Drilled well,	25
Dug well,	9
Spring,	14

Surface drainage not excluded,	30
Nuisance within 100 feet,	11
Menace on higher level,	4
Cooler with spigot,	4
Bucket not covered,	43
Not scalded daily,	40
Fresh supply not secured each session,	18
Individual cups not used,	45
Cups dipped in bucket,	

GROUND POLLUTION, 1

PRIVIES

One single,	
Approaches not screened,	34
Dividing fences not tight,	24
Bad repair,	13
Not clean,	17
Objectionable odor,	16
No vault,	
Vault not water tight,	40
Vault full,	4
Vault overflowing,	4
Lime or ashes not used,	46
Surface drainage not excluded,	40

URINALS AND FLUSH CLOSETS

Not properly vented,	1
Not clean,	
Objectionable odor,	1
Not sufficiently ventilated,	

WASHINGTON COUNTY.

No. schools inspected,	42
No. schools insanitary,	35
No. schools sanitary,	7

SCHOOL BUILDING

Rooms and halls unclean,	
Sawdust and antiseptics not used,	37
Dry dusting,	39
Light surface not 20 per cent. of floor space,	2
Light admitted in front of pupils,	13
Ventilation insufficient,	2
Stove in room,	31
Stove not jacketed,	22
Steam or hot water,	
Furnace in cellar,	10
Room not warm,	5
Floors not warm,	4

WATER SUPPLY

Hydrant or spigot in room,	2
Spigot in building or on ground,	1
Drilled well,	30
Dug well,	3
Spring,	3
Surface drainage not excluded,	
Nuisance within 100 feet,	4
Menace on higher level,	1
Cooler with spigot,	1
Bucket not covered,	25
Not scalded daily,	26
Fresh supply not secured each session,	4
Individual cups not used,	32
Cups dipped in bucket,	22

GROUND POLLUTION

PRIVIES

One single,	4
Approaches not screened,	14
Dividing fences not tight,	12

Bad repair,	4
Not clean,	17
Objectionable odor,	17
No vault,	10
Vault not water tight,	4
Vault full,	7
Vault overflowing,	1
Lime or ashes not used,	16
Surface drainage not excluded,	13

URINALS AND FLUSH CLOSETS

Not properly vented,	1
Not clean,	
Objectionable odor,	
Not sufficiently ventilated,	1

WESTMORELAND COUNTY.

No. schools inspected,	52
No. schools insanitary,	47
No. schools sanitary,	5

SCHOOL BUILDING

Rooms and halls unclean,	3
Sawdust and antiseptics not used,	40
Dry dusting,	42
Light surface not 20 per cent. of floor space,	9
Light admitted in front of pupils,	3
Ventilation insufficient,	12
Stove in room,	44
Stove not jacketed,	8
Steam or hot water,	2
Furnace in cellar,	6
Room not warm,	2
Floors not warm,	3

WATER SUPPLY

Fountain,	7
Hydrant or spigot in room,	
Spigot in building or on ground,	21
Drilled well,	15
Dug well,	8
Spring,	10
Surface drainage not excluded,	9
Nuisance within 100 feet,	
Menace on higher level,	23
Cooler with spigot,	25
Bucket not covered,	3
Not scalded daily,	37
Fresh supply not secured each session,	27
Individual cups not used,	
Cups dipped in bucket,	

GROUND POLLUTION

PRIVIES

One single,	1
Approaches not screened,	23
Dividing fences not tight,	11
Bad repair,	3
Not clean,	23
Objectionable odor,	21
No vault,	52
Vault not water tight,	14
Vault full,	1
Vault overflowing,	3
Lime or ashes not used,	18
Surface drainage not excluded,	22

URINALS AND FLUSH CLOSETS

Not properly vented,	
Not clean,	
Objectionable odor,	1
Not sufficiently ventilated,	1

WAYNE COUNTY.

No. schools inspected,	15
No. schools insanitary,	13
No. schools sanitary,	2

SCHOOL BUILDING

Rooms and halls unclean,	3
Sawdust and antiseptics not used,	14
Dry dusting,	13
Light surface not 20 per cent. of floor space,	3
Light admitted in front of pupils,	4
Ventilation insufficient,	14
Stove in room,	14
Stove not jacketed,	13
Steam or hot water, .....	.....
Furnace in cellar, .....	.....
Room not warm,	8
Floors not warm,	10

WATER SUPPLY

Hydrant or spigot in room, .....	.....
Spigot in building or on ground, .....	.....
Drilled well,	1
Dug well,	6
Spring,	7
Surface drainage not excluded,	8
Nuisance within 100 feet,	1
Menace on higher level,	1
Cooler with spigot,	4
Bucket not covered,	2
Not scalded daily,	6
Fresh supply not secured each session,	1
Individual cups not used,	11
Cups dipped in bucket,	5

GROUND POLLUTION

PRIVIES

One single, .....	.....
Approaches not screened,	13
Dividing fences not tight,	13
Bad repair,	13
Not clean,	12
Objectionable odor,	9
No vault,	9
Vault not water tight,	13
Vault full,	5
Vault overflowing,	4
Lime or ashes not used,	12
Surface drainage not excluded,	12

URINALS AND FLUSH CLOSETS

Not properly vented, .....	.....
Not clean, .....	.....
Objectionable odor, .....	.....
Not sufficiently ventilated, .....	.....

WYOMING COUNTY.

No. schools inspected,	16
No. schools insanitary,	15
No. schools sanitary,	1

SCHOOL BUILDING

Rooms and halls unclean,	2
Sawdust and antiseptics not used,	13
Dry dusting,	8
Light surface not 20 per cent. of floor space,	2
Light admitted in front of pupils,	4
Ventilation insufficient,	10

Stove in room,	13
Stove not jacketed,	7
Steam or hot water, .....	.....
Furnace in cellar,	3
Room not warm, .....	.....
Floors not warm, .....	.....

WATER SUPPLY

Hydrant or spigot in room, .....	.....
Spigot in building or on ground,	1
Drilled well, .....	.....
Dug well,	7
Spring,	8
Surface drainage not excluded, .....	.....
Nuisance within 100 feet,	2
Menace on higher level,	1
Cooler with spigot,	1
Bucket not covered,	2
Not scalded daily,	3
Fresh supply not secured each session,	1
Individual cups not used,	14
Cups dipped in bucket,	12

GROUND POLLUTION

PRIVIES

One single,	7
Approaches not screened,	5
Dividing fences not tight,	2
Bad repair, .....	.....
Not clean,	6
Objectionable odor,	7
No vault,	4
Vault not water tight, .....	.....
Vault full,	4
Vault overflowing,	4
Lime or ashes not used,	3
Surface drainage not excluded,	1

URINALS AND FLUSH CLOSETS

Not properly vented, .....	.....
Not clean, .....	.....
Objectionable odor, .....	.....
Not sufficiently ventilated, .....	.....

YORK COUNTY.

No. schools inspected,	232
No. schools insanitary,	216
No. schools sanitary,	16

SCHOOL BUILDING

Rooms and halls unclean,	9
Sawdust and antiseptics not used,	199
Dry dusting,	213
Light surface not 20 per cent. of floor space,	60
Light admitted in front of pupils,	65
Ventilation insufficient,	191
Stove in room,	205
Stove not jacketed,	92
Steam or hot water,	18
Furnace in cellar,	17
Room not warm,	33
Floors not warm,	33

WATER SUPPLY

Hydrant or spigot in room,	8
Spigot in building or on ground,	10
Drilled well,	62
Dug well,	68
Spring,	71
Surface drainage not excluded,	24
Nuisance within 100 feet,	49

Menace on higher level,	44
Cooler with spigot,	132
Bucket not covered,	34
Not scalded daily,	172
Fresh supply not secured each session,	10
Individual cups not used,	135
Cups dipped in bucket,	55

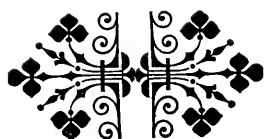
GROUND POLLUTION,	25
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PRIVIES

One single,	9
Approaches not screened,	123
Dividing fences not tight,	109
Bad repair,	36
Not clean,	81
Objectionable odor,	107
No vault,	78
Vault not water tight,	43
Vault full,	87
Vault overflowing,	53
Lime or ashes not used,	79
Surface drainage not excluded,	65

URINALS AND FLUSH CLOSETS

Not properly vented,	2
Not clean,	
Objectionable odor,	
Not sufficiently ventilated,	



Report
OF
Inspection of Dairies 1911



GRAND TOTAL.

DAIRIES.

SPRING—1911.

Total number of dairies inspected,	66,782
Number in sanitary condition,	4,399
Number in insanitary condition,	62,383
CLEANLINESS OF COWS	
Teats clean,	No. 2,257
Udders clean,	3,711
Flanks clean,	20,232
Tails clean,	21,164
WATER SUPPLY FOR CATTLE	
Polluted,	Yes. 397
Can cattle wade in polluted water,	778
STABLE	
Floor of stable clean and dry,	8,651
Ceiling clean,	26,216
Ceiling tight,	25,390
Manure removed daily,	9,404
Cows lie down in their dung,	26,837
Stable well ventilated,	5,902
Sunlight enter stable,	10,139
COW YARD	
Stable manure scattered so that cattle can lie in it,	24,698
Pools of manure water in yard,	16,362
MILK HOUSE	
Separate,	28,781
Windows and doors screened from flies,	18,434
Provisions for hot water,	1,784
Milk pails and strainers clean,	150
WATER SUPPLY FOR MILK HOUSE	
Polluted,	87
MILKING	
Milkers wear clean covering when milking,	33,323
Milkers wash hands before milking,	3,597
Milkers cleanse teats and udders of cows,	3,165
Milking stools clean,	3,068
Milkers allow fore milk to go into can,	31,163
Milk used on hands and teats when milking,	9,884
HANDLING OF MILK	
Milk cooled immediately after milking,	7,288
Dirty habits noticed,	1,013
CONTAGIOUS DISEASES WITHIN YEAR	
Diphtheria,	133
Tuberculosis,	102
Scarlet fever,	205
Typhoid fever,	304
Dysentery,	37

ADAMS COUNTY.

Total number of dairies inspected,	11,41
Number in sanitary condition,	50
Number in insanitary condition,	1,091
CLEANLINESS OF COWS	
	No.
Teats clean,	18
Udders clean,	36
Flanks clean,	131
Tails clean,	117
WATER SUPPLY FOR CATTLE	
	Yes.
Polluted,	0
Can cattle wade in polluted water,	1
STABLE	
Floor of stable clean and dry,	163
Ceiling clean,	330
Ceiling tight,	559
Manure removed daily,	355
Cows lie down in their dung,	775
Stable well ventilated,	53
Sunlight enter stable,	116
COW YARD	
Stable manure scattered so that cattle can lie in it,	785
Pools of manure water in yard,	45
MILK HOUSE	
Separate,	590
Windows and doors screened from flies,	381
Provisions for hot water,	3
Milk pails and strainers clean,	4
WATER SUPPLY FOR MILK HOUSE	
Polluted,	0
MILKING	
Milkers wear clean covering when milking,	412
Milkers wash hands before milking,	218
Milkers cleanse teats and udders of cows,	243
Milking stools clean,	12
Milkers allow fore milk to go into can,	377
Milk used on hands and teats when milking,	167
HANDLING OF MILK	
Milk cooled immediately after milking,	137
Dirty habits noticed,	0
CONTAGIOUS DISEASES WITHIN YEAR	
Diphtheria,	
Tuberculosis,	
Scarlet fever,	
Typhoid fever,	
Dysentery,	

ALLEGHENY COUNTY.

Total number of dairies inspected,	1,002
Number in sanitary condition,	117
Number in insanitary condition,	885
CLEANLINESS OF COWS	
	No.
Teats clean,	26
Udders clean,	27
Flanks clean,	169
Tails clean,	181

WATER SUPPLY FOR CATTLE

Yes.
12
27

Polluted,	12
Can cattle wade in polluted water,	27

STABLE

Floor of stable clean and dry,	95
Ceiling clean,	215
Ceiling tight,	245
Manure removed daily,	15
Cows lie down in their dung,	193
Stable well ventilated,	84
Sunlight enter stable,	90

COW YARD

Stable manure scattered so that cattle can lie in it,	91
Pools of manure water in yard,	101

MILK HOUSE

Separate,	113
Windows and doors screened from flies,	430
Provisions for hot water,	9
Milk pails and strainers clean,	6

WATER SUPPLY FOR MILK HOUSE

Polluted,	4
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MILKING

Milkers wear clean covering when milking,	557
Milkers wash hands before milking,	19
Milkers cleanse teats and udders of cows,	12
Milking stools clean,	29
Milkers allow fore milk to go into can,	528
Milk used on hands and teats when milking,	185

HANDLING OF MILK

Milk cooled immediately after milking,	120
Dirty habits noticed,	0

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	0
Tuberculosis,	1
Scarlet fever,	3
Typhoid fever,	11
Dysentery,	

ARMSTRONG COUNTY.

Total number of dairies inspected,	318
Number in sanitary condition,	7
Number in insanitary condition,	311

CLEANLINESS OF COWS

Teats clean,	No. 13
Udders clean,	18
Flanks clean,	75
Tails clean,	36

WATER SUPPLY FOR CATTLE

Yes.
6
12

Polluted,	6
Can cattle wade in polluted water,	12

STABLE

Floor of stable clean and dry,	26
Ceiling clean,	68
Ceiling tight,	134
Manure removed daily,	59
Cows lie down in their dung,	127
Stable well ventilated,	17
Sunlight enter stable,	67

COW YARD

Stable manure scattered so that cattle can lie in it,	21
Pools of manure water in yard,	22

MILK HOUSE

Separate,	119
Windows and doors screened from flies,	97
Provisions for hot water,	1
Milk pails and strainers clean,	3

WATER SUPPLY FOR MILK HOUSE

Polluted,	3
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MILKING

Milkers wear clean covering when milking,	85
Milkers wash hands before milking,	8
Milkers cleanse teats and udders of cows,	14
Milking stools clean,	9
Milkers allow fore milk to go into can,	186
Milk used on hands and teats when milking,	45

HANDLING OF MILK

Milk cooled immediately after milking,	94
Dirty habits noticed,	12

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	1
Tuberculosis,	0
Scarlet fever,	0
Typhoid fever,	1
Dysentery,	0

BEAVER COUNTY.

Total number of dairies inspected,	586
Number in sanitary condition,	5
Number in insanitary condition,	581

CLEANLINESS OF COWS

Teats clean,	No. 11
Udders clean,	13
Flanks clean,	135
Tails clean,	126

WATER SUPPLY FOR CATTLE

Polluted,	Yes. 2
Can cattle wade in polluted water,	43

STABLE

Floor of stable clean and dry,	70
Ceiling clean,	244
Ceiling tight,	289
Manure removed daily,	18
Cows lie down in their dung,	172
Stable well ventilated,	33
Sunlight enter stable,	60

COW YARD

Stable manure scattered so that cattle can lie in it,	103
Pools of manure water in yard,	86

MILK HOUSE

Separate,	205
Windows and doors screened from flies,	210
Provisions for hot water,	67
Milk pails and strainers clean,	0

WATER SUPPLY FOR MILK HOUSE

Polluted,	0
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MILKING

Milkers wear clean covering when milking,	409
Milkers wash hands before milking,	20
Milkers cleanse teats and udders of cows,	13
Milking stools clean,	40
Milkers allow fore milk to go into can,	321
Milk used on hands and teats when milking,	112

HANDLING OF MILK

Milk cooled immediately after milking,	21
Dirty habits noticed,	2

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	0
Tuberculosis,	0
Scarlet fever,	0
Typhoid fever,	6
Dysentery,	0

BEDFORD COUNTY.

Total number of dairies inspected,	794
Number in sanitary condition,	26
Number in insanitary condition,	768

CLEANLINESS OF COWS

Teats clean,	No. 4
Udders clean,	19
Flanks clean,	123
Tails clean,	239

WATER SUPPLY FOR CATTLE

Polluted,	Yes. 9
Can cattle wade in polluted water,	18

STABLE

Floor of stable clean and dry,	45
Ceiling clean,	286
Ceiling tight,	367
Manure removed daily,	62
Cows lie down in their dung,	330
Stable well ventilated,	31
Sunlight enter stable,	164

COW YARD

Stable manure scattered so that cattle can lie in it,	600
Pools of manure water in yard,	102

MILK HOUSE

Separate,	225
Windows and doors screened from flies,	227
Provisions for hot water,	12
Milk pails and strainers clean,	5

WATER SUPPLY FOR MILK HOUSE

Polluted,	2
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MILKING

Milkers wear clean covering when milking,	459
Milkers wash hands before milking,	35
Milkers cleanse teats and udders of cows,	19
Milking stools clean,	64
Milkers allow fore milk to go into can,	426
Milk used on hands and teats when milking,	97

HANDLING OF MILK

Milk cooled immediately after milking,	195
Dirty habits noticed,	2

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	4
Tuberculosis,	1
Scarlet fever,	0
Typhoid fever,	15
Dysentery,	0

BERKS COUNTY.

Total number of dairies inspected,	3,231
Number in sanitary condition,	339
Number in insanitary condition,	2,892

CLEANLINESS OF COWS

Teats clean,	No. 82
Udders clean,	178
Flanks clean,	831
Tails clean,	805

WATER SUPPLY FOR CATTLE

	Yes.
Polluted,	4
Can cattle wade in polluted water,	13

STABLE

Floor of stable clean and dry,	255
Ceiling clean,	900
Ceiling tight,	979
Manure removed daily,	555
Cows lie down in their dung,	1,747
Stable well ventilated,	220
Sunlight enter stable,	214

COW YARD

Stable manure scattered so that cattle can lie in it,	1,250
Pools of manure water in yard,	154

MILK HOUSE

Separate,	1,524
Windows and doors screened from flies,	1,140
Provisions for hot water,	655
Milk pails and strainers clean,	5

WATER SUPPLY FOR MILK HOUSE

Polluted,	3
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MILKING

Milkers wear clean covering when milking,	759
Milkers wash hands before milking,	302
Milkers cleanse teats and udders of cows,	355
Milking stools clean,	186
Milkers allow fore milk to go into can,	508
Milk used on hands and teats when milking,	619

HANDLING OF MILK

Milk cooled immediately after milking,	472
Dirty habits noticed,	6

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	2
Tuberculosis,	0
Scarlet fever,	1
Typhoid fever,	7
Dysentery,	0

BLAIR COUNTY.

Total number of dairies inspected,	715
Number in sanitary condition,	57
Number in insanitary condition,	658

CLEANLINESS OF COWS

Teats clean,	No. 20
Udders clean,	32
Flanks clean,	234
Tails clean,	328

WATER SUPPLY FOR CATTLE

	Yes.
Polluted,	3
Can cattle wade in polluted water,	7

STABLE

Floor of stable clean and dry,	87
Ceiling clean,	324
Ceiling tight,	304
Manure removed daily,	31
Cows lie down in their dung,	325
Stable well ventilated,	37
Sunlight enter stable,	61

COW YARD

Stable manure scattered so that cattle can lie in it,	352
Pools of manure water in yard,	122

MILK HOUSE

Separate,	347
Windows and doors screened from flies,	178
Provisions for hot water,	2
Milk pails and strainers clean,	0

WATER SUPPLY FOR MILK HOUSE

Polluted,	0
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MILKING

Milkers wear clean covering when milking,	300
Milkers wash hands before milking,	20
Milkers cleanse teats and udders of cows,	11
Milking stools clean,	48
Milkers allow fore milk to go into can,	258
Milk used on hands and teats when milking,	103

HANDLING OF MILK

Milk cooled immediately after milking,	96
Dirty habits noticed,	1

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	3
Tuberculosis,	0
Scarlet fever,	0
Typhoid fever,	9
Dysentery,	0

BRADFORD COUNTY.

Total number of dairies inspected,	3,166
Number in sanitary condition,	404
Number in insanitary condition,	2,762

CLEANLINESS OF COWS

Teats clean,	No. 74
Udders clean,	110
Flanks clean,	773
Tails clean,	989

WATER SUPPLY FOR CATTLE

Polluted,	Yes. 2
Can cattle wade in polluted water,	34

STABLE

Floor of stable clean and dry,	424
Ceiling clean,	1,227
Ceiling tight,	904
Manure removed daily,	168
Cows lie down in their dung,	417
Stable well ventilated,	291
Sunlight enter stable,	585

COW YARD

Stable manure scattered so that cattle can lie in it,	591
Pools of manure water in yard,	380

MILK HOUSE

Separate,	1,937
Windows and doors screened from flies,	1,255
Provisions for hot water,	4
Milk pails and strainers clean,	6

WATER SUPPLY FOR MILK HOUSE

Polluted,	0
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MILKING

Milkers wear clean covering when milking,	2,493
Milkers wash hands before milking,	166
Milkers cleanse teats and udders of cows,	33
Milking stools clean,	134
Milkers allow fore milk to go into can,	1,810
Milk used on hands and teats when milking,	128

HANDLING OF MILK

Milk cooled immediately after milking,	647
Dirty habits noticed,	125

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	2
Tuberculosis,	8
Scarlet fever,	6
Typhoid fever,	5
Dysentery,	1

BUCKS COUNTY.

Total number of dairies inspected,	2,134
Number in sanitary condition,	136
Number in insanitary condition,	1,998

CLEANLINESS OF COWS

	No.
Teats clean,	78
Udders clean,	113
Flanks clean,	526
Tails clean,	590

WATER SUPPLY FOR CATTLE

	Yes.
Polluted,	5
Can cattle wade in polluted water,	18

STABLE

Floor of stable clean and dry,	193
Ceiling clean,	665
Ceiling tight,	745
Manure removed daily,	192
Cows lie down in their dung,	680
Stable well ventilated,	210
Sunlight enter stable,	318

COW YARD

Stable manure scattered so that cattle can lie in it,	561
Pools of manure water in yard,	271

MILK HOUSE

Separate,	1,056
Windows and doors screened from flies,	778
Provisions for hot water,	244
Milk pails and strainers clean,	34

WATER SUPPLY FOR MILK HOUSE

Polluted,	10
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MILKING

Milkers wear clean covering when milking,	850
Milkers wash hands before milking,	150
Milkers cleanse teats and udders of cows,	62
Milking stools clean,	182
Milkers allow fore milk to go into can,	549
Milk used on hands and teats when milking,	278

HANDLING OF MILK

Milk cooled immediately after milking,	204
Dirty habits noticed,	12

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	1
Tuberculosis,	3
Scarlet fever,	1
Typhoid fever,	5
Dysentery,	0

BUTLER COUNTY

Total number of dairies inspected,	768
Number in sanitary condition,	22
Number in insanitary condition,	746

CLEANLINESS OF COWS

Teats clean,	No. 25
Udders clean,	52
Flanks clean,	343
Tails clean,	344

WATER SUPPLY FOR CATTLE

	Yes.
Polluted,	0
Can cattle wade in polluted water,	0

STABLE

Floor of stable clean and dry,	96
Ceiling clean,	338
Ceiling tight,	393
Manure removed daily,	53
Cows lie down in their dung,	350
Stable well ventilated,	75
Sunlight enter stable,	172

COW YARD

Stable manure scattered so that cattle can lie in it,	147
Pools of manure water in yard,	92

MILK HOUSE

Separate,	157
Windows and doors screened from flies,	375
Provisions for hot water,	3
Milk pails and strainers clean,	1

WATER SUPPLY FOR MILK HOUSE

Polluted,	0
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MILKING

Milkers wear clean covering when milking,	606
Milkers wash hands before milking,	33
Milkers cleanse teats and udders of cows,	188
Milking stools clean,	34
Milkers allow fore milk to go into can,	477
Milk used on hands and teats when milking,	231

HANDLING OF MILK

Milk cooled immediately after milking,	172
Dirty habits noticed,	1

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	3
Tuberculosis,	1
Scarlet fever,	3
Typhoid fever,	8
Dysentery,	1

CAMBRIA COUNTY.

Total number of dairies inspected,	519
Number in sanitary condition,	45
Number in insanitary condition,	474

CLEANLINESS OF COWS

Teats clean,	No. 6
Udders clean,	17
Flanks clean,	127
Tails clean,	127

WATER SUPPLY FOR CATTLE

Polluted,	Yes. 1
Can cattle wade in polluted water,	1

STABLE

Floor of stable clean and dry,	70
Ceiling clean,	247
Ceiling tight,	217
Manure removed daily,	46
Cows lie down in their dung,	203
Stable well ventilated,	48
Sunlight enter stable,	75

COW YARD

Stable manure scattered so that cattle can lie in it,	128
Pools of manure water in yard,	52

MILK HOUSE

Separate,	132
Windows and doors screened from flies,	5
Provisions for hot water,	1
Milk pails and strainers clean,	0

WATER SUPPLY FOR MILK HOUSE

Polluted,	0
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MILKING

Milkers wear clean covering when milking,	216
Milkers wash hands before milking,	3
Milkers cleanse teats and udders of cows,	2
Milking stools clean,	2
Milkers allow fore milk to go into can,	234
Milk used on hands and teats when milking,	85

HANDLING OF MILK

Milk cooled immediately after milking,	1
Dirty habits noticed,	0

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	1
Tuberculosis,	0
Scarlet fever,	0
Typhoid fever,	1
Dysentery,	0

CAMERON COUNTY.

Total number of dairies inspected,	6
Number in sanitary condition,	0
Number in insanitary condition,	6

CLEANLINESS OF COWS

Teats clean,	No. 2
Udders clean,	1
Flanks clean,	3
Tails clean,	6

WATER SUPPLY FOR CATTLE

	Yes.
Polluted,	0
Can cattle wade in polluted water,	0

STABLE

Floor of stable clean and dry,	2
Ceiling clean,	0
Ceiling tight,	3
Manure removed daily,	0
Cows lie down in their dung,	4
Stable well ventilated,	4
Sunlight enter stable,	3

COW YARD

Stable manure scattered so that cattle can lie in it,	1
Pools of manure water in yard,	0

MILK HOUSE

Separate,	3
Window and doors screened from flies,	0
Provisions for hot water,	0
Milk pails and strainers clean,	0

WATER SUPPLY FOR MILK HOUSE

Polluted,	0
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MILKING

Milkers wear clean covering when milking,	5
Milkers wash hands before milking,	0
Milkers cleanse teats and udders of cows,	0
Milking stools clean,	0
Milkers allow fore milk to go into can,	3
Milk used on hands and teats when milking,	0

HANDLING OF MILK

Milk cooled immediately after milking,	1
Dirty habits noticed,	0

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	
Tuberculosis,	
Scarlet fever,	
Typhoid fever,	
Dysentery,	

CARBON COUNTY.

Total number of dairies inspected,	263
Number in sanitary condition,	1
Number in insanitary condition,	267

CLEANLINESS OF COWS

No.

Teats clean,	9
Udders clean,	13
Flanks clean,	93
Tails clean,	110

WATER SUPPLY FOR CATTLE

Yes.

Polluted,	0
Can cattle wade in polluted water,	0

STABLE

Floor of stable clean and dry,	34
Ceiling clean,	104
Ceiling tight,	138
Manure removed daily,	33
Cows lie down in their dung,	129
Stable well ventilated,	19
Sunlight enter stable,	22

COW YARD

Stable manure scattered so that cattle can lie in it,	193
Pools of manure water in yard,	44

MILK HOUSE

Separate,	135
Windows and doors screened from flies,	9
Provisions for hot water,	0
Milk pails and strainers clean,	0

WATER SUPPLY FOR MILK HOUSE

Polluted,	0
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MILKING

Milkers wear clean covering when milking,	71
Milkers wash hands before milking,	0
Milkers cleanse teats and udders of cows,	0
Milking stools clean,	0
Milkers allow fore milk to go into can,	116
Milk used on hands and teats when milking,	18

HANDLING OF MILK

Milk cooled immediately after milking,	0
Dirty habits noticed,	0

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	0
Tuberculosis,	0
Scarlet fever,	1
Typhoid fever,	1
Dysentery,	0

CENTRE COUNTY.

Total number of dairies inspected,	979
Number in sanitary condition,	25
Number in insanitary condition,	954

CLEANLINESS OF COWS

No.

Teats clean,	23
Udders clean,	39
Flanks clean,	334
Tails clean,	237

WATER SUPPLY FOR CATTLE

Yes.

Polluted,	0
Can cattle wade in polluted water,	0

STABLE

Floor of stable clean and dry,	144
Ceiling clean,	408
Ceiling tight,	309
Manure removed daily,	134
Cows lie down in their dung,	456
Stable well ventilated,	85
Sunlight enter stable,	119

COW YARD

Stable manure scattered so that cattle can lie in it,	697
Pools of manure water in yard,	151

MILK HOUSE

Separate,	481
Windows and doors screened from flies,	59
Provisions for hot water,	0
Milk pails and strainers clean,	2

WATER SUPPLY FOR MILK HOUSE

Polluted,	0
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MILKING

Milkers wear clean covering when milking,	377
Milkers wash hands before milking,	0
Milkers cleanse teats and udders of cows,	0
Milking stools clean,	11
Milkers allow fore milk to go into can,	554
Milk used on hands and teats when milking,	198

HANDLING OF MILK

Milk cooled immediately after milking,	191
Dirty habits noticed,	19

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	1
Tuberculosis,	1
Scarlet fever,	5
Typhoid fever,	2
Dysentery,	2

CHESTER COUNTY.

Total number of dairies inspected,	3,118
Number in sanitary condition,	272
Number in insanitary condition,	2,846

CLEANLINESS OF COWS

Teats clean,	No. 36
Udders clean,	63
Flanks clean,	717
Tails clean,	828

WATER SUPPLY FOR CATTLE

Yes.	
Polluted,	19
Can cattle wade in polluted water,	36

STABLE

Floor of stable clean and dry,	172
Ceiling clean,	1,082
Ceiling tight,	1,535
Manure removed daily,	41
Cows lie down in their dung,	1,518
Stable well ventilated,	212
Sunlight enter stable,	528

COW YARD

Stable manure scattered so that cattle can lie in it,	1,769
Pools of manure water in yard,	305

MILK HOUSE

Separate,	905
Windows and doors screened from flies,	1,141
Provisions for hot water,	127
Milk pails and strainers clean,	5

WATER SUPPLY FOR MILK HOUSE

Polluted,	9
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MILKING

Milkers wear clean covering when milking,	2,201
Milkers wash hands before milking,	277
Milkers cleanse teats and udders of cows,	234
Milking stools clean,	77
Milkers allow fore milk to go into can,	2,041
Milk used on hands and teats when milking,	373

HANDLING OF MILK

Milk cooled immediately after milking,	68
Dirty habits noticed,	5

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	6
Tuberculosis,	0
Scarlet fever,	0
Typhoid fever,	3
Dysentery,	0

CLARION COUNTY.

Total number of dairies inspected,	1,124
Number in sanitary condition,	18
Number in unsanitary condition,	1,106

CLEANLINESS OF COWS

	No.
Teats clean,	60
Udders clean,	71
Flanks clean,	322
Tails clean,	253

WATER SUPPLY FOR CATTLE

	Yes.
Polluted,	2
Can cattle wade in polluted water,	13

STABLE

Floor of stable clean and dry,	194
Ceiling clean,	519
Ceiling tight,	526
Manure removed daily,	312
Cows lie down in their dung,	358
Stable well ventilated,	131
Sunlight enter stable,	141

COW YARD

Stable manure scattered so that cattle can lie in it,	179
Pools of manure water in yard,	85

MILK HOUSE

Separate,	619
Windows and doors screened from flies,	281
Provisions for hot water,	0
Milk pails and strainers clean,	0

WATER SUPPLY FOR MILK HOUSE

Polluted,	0
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MILKING

Milkers wear clean covering when milking,	760
Milkers wash hands before milking,	50
Milkers cleanse teats and udders of cows,	109
Milking stools clean,	17
Milkers allow fore milk to go into can,	747
Milk used on hands and teats when milking,	134

HANDLING OF MILK

Milk cooled immediately after milking,	37
Dirty habits noticed,	1

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	0
Tuberculosis,	6
Scarlet fever,	4
Typhoid fever,	6
Dysentery,	7

CLEARFIELD COUNTY.

Total number of dairies inspected,	282
Number in sanitary condition,	5
Number in insanitary condition,	277

CLEANLINESS OF COWS

	No.
Teats clean,	11
Udders clean,	12
Flanks clean,	21
Tails clean,	33

WATER SUPPLY FOR CATTLE

	Yes.
Polluted,	0
Can cattle wade in polluted water,	0

STABLE

Floor of stable clean and dry,	34
Ceiling clean,	159
Ceiling tight,	164
Manure removed daily,	20
Cows lie down in their dung,	53
Stable well ventilated,	30
Sunlight enter stable,	36

COW YARD

Stable manure scattered so that cattle can lie in it,	97
Pools of manure water in yard,	63

MILK HOUSE

Separate,	123
Windows and doors screened from flies,	170
Provisions for hot water,	1
Milk pails and strainers clean,	0

WATER SUPPLY FOR MILK HOUSE

Polluted,	0
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MILKING

Milkers wear clean covering when milking,	176
Milkers wash hands before milking,	19
Milkers cleanse teats and udders of cows,	3
Milking stools clean,	125
Milkers allow fore milk to go into can,	201
Milk used on hands and teats when milking,	18

HANDLING OF MILK

Milk cooled immediately after milking,	61
Dirty habits noticed,	0

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	0
Tuberculosis,	1
Scarlet fever,	0
Typhoid fever,	5
Dysentery,	0

CLINTON COUNTY.

Total number of dairies inspected,	331
Number in sanitary condition,	11
Number in insanitary condition,	320

CLEANLINESS OF COWS

	No.
Teats clean,	23
Udders clean,	29
Flanks clean,	92
Tails clean,	91

WATER SUPPLY FOR CATTLE

	Yes.
Polluted,	2
Can cattle wade in polluted water,	0

STABLE

Floor of stable clean and dry,	48
Ceiling clean,	221
Ceiling tight,	147
Manure removed daily,	34
Cows lie down in their dung,	159
Stable well ventilated,	20
Sunlight enter stable,	30

COW YARD

Stable manure scattered so that cattle can lie in it,	144
Pools of manure water in yard,	63

MILK HOUSE

Separate,	163
Windows and doors screened from flies,	70
Provisions for hot water,	4
Milk pails and strainers clean,	0

WATER SUPPLY FOR MILK HOUSE

Polluted,	1
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MILKING

Milkers wear clean covering when milking,	103
Milkers wash hands before milking,	10
Milkers cleanse teats and udders of cows,	3
Milking stools clean,	3
Milkers allow fore milk to go into can,	142
Milk used on hands and teats when milking,	39

HANDLING OF MILK

Milk cooled immediately after milking,	11
Dirty habits noticed,	0

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	0
Tuberculosis,	3
Scarlet fever,	1
Typhoid fever,	5
Dysentery,	0

COLUMBIA COUNTY.

Total number of dairies inspected,	327
Number in sanitary condition,	32
Number in insanitary condition,	295

CLEANLINESS OF COWS

Teats clean,	No. 1
Udders clean,	4
Flanks clean,	46
Tails clean,	46

WATER SUPPLY FOR CATTLE

	Yes.
Polluted,	0
Can cattle wade in polluted water,	0

STABLE

Floor of stable clean and dry,	26
Ceiling clean,	169
Ceiling tight,	219
Manure removed daily,	32
Cows lie down in their dung,	87
Stable well ventilated,	26
Sunlight enter stable,	42

COW YARD

Stable manure scattered so that cattle can lie in it,	241
Pools of manure water in yard,	19

MILK HOUSE

Separate,	75
Windows and doors screened from flies,	30
Provisions for hot water,	0
Milk pails and strainers clean,	0

WATER SUPPLY FOR MILK HOUSE

Polluted,	0
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MILKING

Milkers wear clean covering when milking,	52
Milkers wash hands before milking,	6
Milkers cleanse teats and udders of cows,	9
Milking stools clean,	2
Milkers allow fore milk to go into can,	168
Milk used on hands and teats when milking,	13

HANDLING OF MILK

Milk cooled immediately after milking,	0
Dirty habits noticed,	1

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	1
Tuberculosis,	1
Scarlet fever,	1
Typhoid fever,	4
Dysentery,	0

CRAWFORD COUNTY.

Total number of dairies inspected,	3,672
Number in sanitary condition,	179
Number in insanitary condition,	3,494

CLEANLINESS OF COWS

	No.
Teats clean,	87
Udders clean,	155
Flanks clean,	1,121
Tails clean,	1,049

WATER SUPPLY FOR CATTLE

	Yes.
Polluted,	43
Can cattle wade in polluted water,	52

STABLE

Floor of stable clean and dry,	260
Ceiling clean,	1,559
Ceiling tight,	1,576
Manure removed daily,	124
Cows lie down in their dung,	835
Stable well ventilated,	268
Sunlight enter stable,	306

COW YARD

Stable manure scattered so that cattle can lie in it,	298
Pools of manure water in yard,	217

MILK HOUSE

Separate,	2,292
Windows and doors screened from flies,	495
Provisions for hot water,	0
Milk pails and strainers clean,	0

WATER SUPPLY FOR MILK HOUSE

Polluted,	0
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MILKING

Milkers wear clean covering when milking,	2,086
Milkers wash hands before milking,	536
Milkers cleanse teats and udders of cows,	327
Milking stools clean,	317
Milkers allow fore milk to go into can,	1,832
Milk used on hands and teats when milking,	530

HANDLING OF MILK

Milk cooled immediately after milking,	361
Dirty habits noticed,	23

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	2
Tuberculosis,	8
Scarlet fever,	9
Typhoid fever,	25
Dysentery,	1

CUMBERLAND COUNTY.

Total number of dairies inspected,	1,772
Number in sanitary condition,	130
Number in insanitary condition,	1,642

CLEANLINESS OF COWS

	No.
Teats clean,	12
Udders clean,	27
Flanks clean,	247
Tails clean,	289

WATER SUPPLY FOR CATTLE

	Yes.
Polluted,	9
Can cattle wade in polluted water,	34

STABLE

Floor of stable clean and dry,	142
Ceiling clean,	548
Ceiling tight,	747
Manure removed daily,	148
Cows lie down in their dung,	618
Stable well ventilated,	66
Sunlight enter stable,	65

COW YARD

Stable manure scattered so that cattle can lie in it,	432
Pools of manure water in yard,	100

MILK HOUSE

Separate,	717
Windows and doors screened from flies,	921
Provisions for hot water,	1
Milk pails and strainers clean,	0

WATER SUPPLY FOR MILK HOUSE

Polluted,	0
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MILKING

Milkers wear clean covering when milking,	277
Milkers wash hands before milking,	86
Milkers cleanse teats and udders of cows,	41
Milking stools clean,	4
Milkers allow fore milk to go into can,	484
Milk used on hands and teats when milking,	84

HANDLING OF MILK

Milk cooled immediately after milking,	271
Dirty habits noticed,	13

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	1
Tuberculosis,	4
Scarlet fever,	6
Typhoid fever,	6
Dysentery,	0

DAUPHIN COUNTY.

Total number of dairies inspected,	832
Number in sanitary condition,	160
Number in insanitary condition,	672

CLEANLINESS OF COWS

	No.
Teats clean,	35
Udders clean,	40
Flanks clean,	169
Tails clean,	157

WATER SUPPLY FOR CATTLE

	Yes.
Polluted,	4
Can cattle wade in polluted water,	5

STABLE

Floor of stable clean and dry,	64
Ceiling clean,	173
Ceiling tight,	141
Manure removed daily,	101
Cows lie down in their dung,	355
Stable well ventilated,	45
Sunlight enter stable,	84

COW YARD

Stable manure scattered so that cattle can lie in it,	286
Pools of manure water in yard,	99

MILK HOUSE

Separate,	110
Windows and doors screened from flies,	95
Provisions for hot water,	11
Milk pails and strainers clean,	1

WATER SUPPLY FOR MILK HOUSE

Polluted,	0
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MILKING

Milkers wear clean covering when milking,	150
Milkers wash hands before milking,	29
Milkers cleanse teats and udders of cows,	10
Milking stools clean,	4
Milkers allow fore milk to go into can,	190
Milk used on hands and teats when milking,	89

HANDLING OF MILK

Milk cooled immediately after milking,	102
Dirty habits noticed,	2

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	9
Tuberculosis,	1
Scarlet fever,	2
Typhoid fever,	3
Dysentery,	0

DELAWARE COUNTY.

Total number of dairies inspected,	368
Number in sanitary condition,	10
Number in insanitary condition,	358

CLEANLINESS OF COWS

	No.
Teats clean,	11
Udders clean,	25
Flanks clean,	188
Tails clean,	229

WATER SUPPLY FOR CATTLE

	Yes.
Polluted,	23
Can cattle wade in polluted water,	94

STABLE

Floor of stable clean and dry,	30
Ceiling clean,	210
Ceiling tight,	214
Manure removed daily,	8
Cows lie down in their dung,	266
Stable well ventilated,	36
Sunlight enter stable,	35

COW YARD

Stable manure scattered so that cattle can lie in it,	165
Pools of manure water in yard,	110

MILK HOUSE

Separate,	22
Windows and doors screened from flies,	292
Provisions for hot water,	2
Milk pails and strainers clean,	2

WATER SUPPLY FOR MILK HOUSE

Polluted,	4
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MILKING

Milkers wear clean covering when milking,	278
Milkers wash hands before milking,	15
Milkers cleanse teats and udders of cows,	4
Milking stool clean,	72
Milkers allow fore milk to go into can,	265
Milk used on hands and teats when milking,	35

HANDLING OF MILK

Milk cooled immediately after milking,	4
Dirty habits noticed,	0

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	1
Tuberculosis,	0
Scarlet fever,	2
Typhoid fever,	2
Dysentery,	0

ELK COUNTY.

Total number of dairies inspected,	168
Number in sanitary condition,	5
Number in insanitary condition,	163

CLEANLINESS OF COWS

Teats clean,	No. 36
Udders clean,	45
Flanks clean,	84
Tails clean,	88

WATER SUPPLY FOR CATTLE

Polluted,	Yes. 1
Can cattle wade in polluted water,	14

STABLE

Floor of stable clean and dry,	67
Ceiling clean,	85
Ceiling tight,	68
Manure removed daily,	34
Cows lie down in their dung,	65
Stable well ventilated,	39
Sunlight enter stable,	41

COW YARD

Stable manure scattered so that cattle can lie in it,	11
Pools of manure water in yard,	23

MILK HOUSE

Separate,	96
Windows and doors screened from flies,	99
Provisions for hot water,	0
Milk pails and strainers clean,	0

WATER SUPPLY FOR MILK HOUSE

Polluted,	0
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MILKING

Milkers wear clean covering when milking,	83
Milkers wash hands before milking,	3
Milkers cleanse teats and udders of cows,	29
Milking stools clean,	37
Milkers allow fore milk to go into can,	90
Milk used on hands and teats when milking,	35

HANDLING OF MILK

Milk cooled immediately after milking,	26
Dirty habits noticed,	0

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	0
Tuberculosis,	0
Scarlet fever,	0
Typhoid fever,	1
Dysentery,	0

ERIE COUNTY.

Total number of dairies inspected,	2,216
Number in sanitary condition,	53
Number in insanitary condition,	2,163

CLEANLINESS OF COWS

	No.
Teats clean,	67
Udders clean,	97
Flanks clean,	791
Tails clean,	831

WATER SUPPLY FOR CATTLE

	Yes.
Polluted,	13
Can cattle wade in polluted water,	34

STABLE

Floor of stable clean and dry,	376
Ceiling clean,	900
Ceiling tight,	742
Manure removed daily,	107
Cows lie down in their dung,	540
Stable well ventilated,	307
Sunlight enter stable,	409

COW YARD

Stable manure scattered so that cattle can lie in it,	270
Pools of manure water in yard,	163

MILK HOUSE

Separate,	1,372
Windows and doors screened from flies,	425
Provisions for hot water,	0
Milk pails and strainers clean,	1

WATER SUPPLY FOR MILK HOUSE

Polluted,	1
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MILKING

Milkers wear clean covering when milking,	1,676
Milkers wash hands before milking,	193
Milkers cleanse teats and udders of cows,	223
Milking stools clean,	159
Milkers allow fore milk to go into can,	1,167
Milk used on hands and teats when milking,	149

HANDLING OF MILK

Milk cooled immediately after milking,	137
Dirty habits noticed,	497

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	0
Tuberculosis,	3
Scarlet fever,	9
Typhoid fever,	21
Dysentery,	1

FAYETTE COUNTY.

Total number of dairies inspected,	308
Number in sanitary condition,	16
Number in insanitary condition,	292

CLEANLINESS OF COWS

	No.
Teats clean,	17
Udders clean,	27
Flanks clean,	104
Tails clean,	103

WATER SUPPLY FOR CATTLE

	Yes.
Polluted,	4
Can cattle wade in polluted water,	10

STABLE

Floor of stable clean and dry,	62
Ceiling clean,	106
Ceiling tight,	127
Manure removed daily,	51
Cows lie down in their dung,	137
Stable well ventilated,	33
Sunlight enter stable,	46

COW YARD

Stable manure scattered so that cattle can lie in it,	77
Pools of manure water in yard,	40

MILK HOUSE

Separate,	102
Windows and doors screened from flies,	179
Provisions for hot water,	26
Milk pails and strainers clean,	8

WATER SUPPLY FOR MILK HOUSE

Polluted,	4
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MILKING

Milkers wear clean covering when milking,	153
Milkers wash hands before milking,	12
Milkers cleanse teats and udders of cows,	15
Milking stools clean,	17
Milkers allow fore milk to go into can,	153
Milk used on hands and teats when milking,	30

HANDLING OF MILK

Milk cooled immediately after milking,	35
Dirty habits noticed,	0

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	0
Tuberculosis,	4
Scarlet fever,	0
Typhoid fever,	4
Dysentery,	0

FOREST COUNTY.

Total number of dairies inspected,	19
Number in sanitary condition,	1
Number in insanitary condition,	18

CLEANLINESS OF COWS

	No.
Teats clean,	0
Udders clean,	0
Flanks clean,	1
Tails clean,	1

WATER SUPPLY FOR CATTLE

	Yes.
Polluted,	1
Can cattle wade in polluted water,	2

STABLE

Floor of stable clean and dry,	0
Ceiling clean,	2
Ceiling tight,	2
Manure removed daily,	0
Cows lie down in their dung,	2
Stable well ventilated,	1
Sunlight enter stable,	1

COW YARD

Stable manure scattered so that cattle can lie in it,	2
Pools of manure water in yard,	2

MILK HOUSE

Separate,	13
Windows and doors screened from flies,	0
Provisions for hot water,	0
Milk pails and strainers clean,	0

WATER SUPPLY FOR MILK HOUSE

Polluted,	0
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MILKING

Milkers wear clean covering when milking,	0
Milkers wash hands before milking,	0
Milkers cleanse teats and udders of cows,	0
Milking stools clean,	0
Milkers allow fore milk to go into can,	17
Milk used on hands and teats when milking,	16

HANDLING OF MILK

Milk cooled immediately after milking,	0
Dirty habits noticed,	0

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	
Tuberculosis,	
Scarlet fever,	
Typhoid fever,	
Dysentery,	

FRANKLIN COUNTY.

Total number of dairies inspected,	1,661
Number in sanitary condition,	35
Number in insanitary condition,	1,626

CLEANLINESS OF COWS

	No.
Teats clean,	26
Udders clean,	84
Flanks clean,	367
Tails clean,	607

WATER SUPPLY FOR CATTLE

	Yes.
Polluted,	15
Can cattle wade in polluted water,	12

STABLE

Floor of stable clean and dry,	94
Ceiling clean,	532
Ceiling tight,	633
Manure removed daily,	335
Cows lie down in their dung,	993
Stable well ventilated,	23
Sunlight enter stable,	265

COW YARD

Stable manure scattered so that cattle can lie in it,	1,313
Pools of manure water in yard,	199

MILK HOUSE

Separate,	1,033
Windows and doors screened from flies,	770
Provisions for hot water,	133
Milk pails and strainers clean,	10

WATER SUPPLY FOR MILK HOUSE

Polluted,	2
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MILKING

Milkers wear clean covering when milking,	476
Milkers wash hands before milking,	103
Milkers cleanse teats and udders of cows,	125
Milking stools clean,	58
Milkers allow fore milk to go into can,	805
Milk used on hands and teats when milking,	442

HANDLING OF MILK

Milk cooled immediately after milking,	393
Dirty habits noticed,	0

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	3
Tuberculosis,	2
Scarlet fever,	9
Typhoid fever,	24
Dysentery,	1

FULTON COUNTY.

Total number of dairies inspected,	288
Number in sanitary condition,	10
Number in insanitary condition,	278

CLEANLINESS OF COWS

Teats clean,	No. 0
Udders clean,	2
Flanks clean,	27
Tails clean,	58

WATER SUPPLY FOR CATTLE

Polluted,	Yes. 8
Can cattle wade in polluted water,	8

STABLE

Floor of stable clean and dry,	18
Ceiling clean,	100
Ceiling tight,	128
Manure removed daily,	65
Cows lie down in their dung,	124
Stable well ventilated,	8
Sunlight enter stable,	22

COW YARD

Stable manure scattered so that cattle can lie in it,	123
Pools of manure water in yard,	12

MILK HOUSE

Separate,	122
Windows and doors screened from flies,	93
Provisions for hot water,	0
Milk pails and strainers clean,	0

WATER SUPPLY FOR MILK HOUSE

Polluted,	0
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MILKING

Milkers wear clean covering when milking,	164
Milkers wash hands before milking,	71
Milkers cleanse teats and udders of cows,	56
Milking stools clean,	6
Milkers allow fore milk to go into can,	142
Milk used on hands and teats when milking,	21

HANDLING OF MILK

Milk cooled immediately after milking,	68
Dirty habits noticed,	2

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	0
Tuberculosis,	1
Scarlet fever,	0
Typhoid fever,	2
Dysentery,	0

GREENE COUNTY.

Total number of dairies inspected,	24
Number in sanitary condition,	0
Number in insanitary condition,	24

CLEANLINESS OF COWS

	No.
Teats clean,	0
Udders clean,	0
Flanks clean,	7
Tails clean,	1

WATER SUPPLY FOR CATTLE

	Yes.
Polluted,	0
Can cattle wade in polluted water,	0

STABLE

Floor of stable clean and dry,	4
Ceiling clean,	7
Ceiling tight,	11
Manure removed daily,	5
Cows lie down in their dung,	10
Stable well ventilated,	0
Sunlight enter stable,	1

COW YARD

Stable manure scattered so that cattle can lie in it,	2
Pools of manure water in yard,	2

MILK HOUSE

Separate,	16
Windows and doors screened from flies,	6
Provisions for hot water,	0
Milk pails and strainers clean,	0

WATER SUPPLY FOR MILK HOUSE

Polluted,	0
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MILKING

Milkers wear clean covering when milking,	16
Milkers wash hands before milking,	0
Milkers cleanse teats and udders of cows,	0
Milking stools clean,	0
Milkers allow fore milk to go into can,	16
Milk used on hands and teats when milking,	0

HANDLING OF MILK

Milk cooled immediately after milking,	0
Dirty habits noticed,	0

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	
Tuberculosis,	
Scarlet fever,	
Typhoid fever,	
Dysentery,	

HUNTINGDON COUNTY.

Total number of dairies inspected,	432
Number in sanitary condition,	31
Number in insanitary condition,	401

CLEANLINESS OF COWS

	No.
Teats clean,	11
Udders clean,	81
Flanks clean,	123
Tails clean,	111

WATER SUPPLY FOR CATTLE

	Yes.
Polluted,	11
Can cattle wade in polluted water,	16

STABLE

Floor of stable clean and dry,	73
Ceiling clean,	205
Ceiling tight,	179
Manure removed daily,	72
Cows lie down in their dung,	159
Stable well ventilated,	29
Sunlight enter stable,	111

COW YARD

Stable manure scattered so that cattle can lie in it,	286
Pools of manure water in yard,	57

MILK HOUSE

Separate,	81
Windows and oors screened from flies,	110
Provisions for hot water,	0
Milk pails and strainers clean,	0

WATER SUPPLY FOR MILK HOUSE

Polluted,	0
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MILKING

Milkers wear clean covering when milking,	118
Milkers wash hands before milking,	23
Milkers cleanse teats and udders of cows,	41
Milking stools clean,	12
Milkers allow fore milk to go into can,	198
Milk used on hands and teats when milking,	44

HANDLING OF MILK

Milk cooled immediately after milking,	15
Dirty habits noticed,	9

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	1
Tuberculosis,	1
Scarlet fever,	0
Typhoid fever,	3
Dysentery,	1

INDIANA COUNTY.

Total number of dairies inspected,	785
Number in sanitary condition,	15
Number in insanitary condition,	770

CLEANLINESS OF COWS

Teats clean,	No. 32
Udders clean,	53
Flanks clean,	324
Tails clean,	291

WATER SUPPLY FOR CATTLE

	Yes.
Polluted,	18
Can cattle wade in polluted water,	37

STABLE

Floor of stable clean and dry,	306
Ceiling clean,	390
Ceiling tight,	463
Manure removed daily,	318
Cows lie down in their dung,	308
Stable well ventilated,	111
Sunlight enter stable,	210

COW YARD

Stable manure scattered so that cattle can lie in it,	113
Pools of manure water in yard,	75

MILK HOUSE

Separate,	281
Windows and doors screened from flies,	239
Provisions for hot water,	4
Milk pails and strainers clean,	1

WATER SUPPLY FOR MILK HOUSE

Polluted,	0
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MILKING

Milkers wear clean covering when milking,	430
Milkers wash hands before milking,	146
Milkers cleanse teats and udders of cows,	85
Milking stools clean,	56
Milkers allow fore milk to go into can,	446
Milk used on hands and teats when milking,	108

HANDLING OF MILK

Milk cooled immediately after milking,	155
Dirty habits noticed,	54

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	2
Tuberculosis,	1
Scarlet fever,	4
Typhoid fever,	6
Dysentery,	3

JEFFERSON COUNTY.

Total number of dairies inspected,	293
Number in sanitary condition,	2
Number in insanitary condition,	291

CLEANLINESS OF COWS

Teats clean,	No. 3
Udders clean,	9
Flanks clean,	79
Tails clean,	102

WATER SUPPLY FOR CATTLE

Polluted,	Yes. 3
Can cattle wade in polluted water,	4

STABLE

Floor of stable clean and dry,	63
Ceiling clean,	108
Ceiling tight,	122
Manure removed daily,	106
Cows lie down in their dung,	138
Stable well ventilated,	38
Sunlight enter stable,	114

COW YARD

Stable manure scattered so that cattle can lie in it,	141
Pools of manure water in yard,	11

MILK HOUSE

Separate,	132
Windows and doors screened from flies,	62
Provisions for hot water,	0
Milk pails and strainers clean,	0

WATER SUPPLY FOR MILK HOUSE

Polluted,	0
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MILKING

Milkers wear clean covering when milking,	80
Milkers wash hands before milking,	4
Milkers cleanse teats and udders of cows,	5
Milkers stools clean,	0
Milkers allow fore milk to go into can,	207
Milk used on hands and teats when milking,	63

HANDLING OF MILK

Milk cooled immediately after milking,	71
Dirty habits noticed,	3

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	1
Tuberculosis,	1
Scarlet fever,	1
Typhoid fever,	7
Dysentery,	0

JUNIATA COUNTY.

Total number of dairies inspected,	606
Number in sanitary condition,	15
Number in insanitary condition,	591

CLEANLINESS OF COWS

	No.
Teats clean,	10
Udders clean,	14
Flanks clean,	175
Tails clean,	213

WATER SUPPLY FOR CATTLE

	Yes.
Polluted,	11
Can cattle wade in polluted water,	12

STABLE

Floor of stable clean and dry,	32
Ceiling clean,	144
Ceiling tight,	136
Manure removed daily,	180
Cows lie down in their dung,	437
Stable well ventilated,	26
Sunlight enter stable,	87

COW YARD

Stable manure scattered so that cattle can lie in it,	314
Pools of manure water in yard,	38

MILK HOUSE

Separate,	169
Windows and doors screened from flies,	117
Provisions for hot water,	2
Milk pails and strainers clean,	2

WATER SUPPLY FOR MILK HOUSE

Polluted,	10
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MILKING

Milkers wear clean covering when milking,	248
Milkers wash hands before milking,	20
Milkers cleanse teats and udders of cows,	3
Milking stools clean,	22
Milkers allow fore milk to go into can,	100
Milk used on hands and teats when milking,	62

HANDLING OF MILK

Milk cooled immediately after milking,	16
Dirty habits noticed,	0

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	4
Tuberculosis,	0
Scarlet fever,	1
Typhoid fever,	1
Dysentery,	0

LACKAWANNA COUNTY.

Total number of dairies inspected,	259
Number in sanitary condition,	11
Number in insanitary condition,	248

CLEANLINESS OF COWS

	No.
Teats clean,	9
Udders clean,	14
Flanks clean,	30
Tails clean,	44

WATER SUPPLY FOR CATTLE

	Yes.
Polluted,	4
Can cattle wade in polluted water,	9

STABLE

Floor of stable clean and dry,	18
Ceiling clean,	62
Ceiling tight,	69
Manure removed daily,	8
Cows lie down in their dung,	22
Stable well ventilated,	14
Sunlight enter stable,	12

COW YARD

Stable manure scattered so that cattle can lie in it,	24
Pools of manure water in yard,	21

MILK HOUSE

Separate,	107
Windows and doors screened from flies,	163
Provisions for hot water,	2
Milk pails and strainers clean,	2

WATER SUPPLY FOR MILK HOUSE

Polluted,	0
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MILKING

Milkers wear clean covering when milking,	163
Milkers wash hands before milking,	8
Milkers cleanse teats and udders of cows,	6
Milking stools clean,	7
Milkers allow fore milk to go into can,	136
Milk used on hands and teats when milking,	21

HANDLING OF MILK

Milk cooled immediately after milking,	1
Dirty habits noticed,	1

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	0
Tuberculosis,	0
Scarlet fever,	1
Typhoid fever,	0
Dysentery,	0

LANCASTER COUNTY.

Total number of dairies inspected,	4,242
Number in sanitary condition,	119
Number in insanitary condition,	4,123

CLEANLINESS OF COWS

	No.
Teats clean,	193
Udders clean,	314
Flanks clean,	2,010
Tails clean,	1,619

WATER SUPPLY FOR CATTLE

	Yes.
Polluted,	37
Can cattle wade in polluted water,	50

STABLE

Floor of stable clean and dry,	625
Ceiling clean,	1,805
Ceiling tight,	1,272
Manure removed daily,	2,252
Cows lie down in their dung,	3,114
Stable well ventilated,	291
Sunlight enter stable,	542

COW YARD

Stable manure scattered so that cattle can lie in it,	2,619
Pools of manure water in yard,	500

MILK HOUSE

Separate,	2,416
Windows and doors screened from flies,	1,723
Provisions for hot water,	43
Milk pails and strainers clean,	10

WATER SUPPLY FOR MILK HOUSE

Polluted,	7
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MILKING

Milkers wear clean covering when milking,	1,176
Milkers wash hands before milking,	192
Milkers cleanse teats and udders of cows,	274
Milking stools clean,	335
Milkers allow fore milk to go into can,	1,781
Milk used on hands and teats when milking,	1,211

HANDLING OF MILK

Milk cooled immediately after milking,	524
Dirty habits noticed,	2

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	8
Tuberculosis,	6
Scarlet fever,	41
Typhoid fever,	13
Dysentery,	6

LAWRENCE COUNTY.

Total number of dairies inspected,	1,167
Number in sanitary condition,	14
Number in insanitary condition,	1,153

CLEANLINESS OF COWS

	No.
Teats clean,	72
Udders clean,	109
Flanks clean,	442
Tails clean,	454

WATER SUPPLY FOR CATTLE

	Yes.
Polluted,	3
Can cattle wade in polluted water,	0

STABLE

Floor of stable clean and dry,	141
Ceiling clean,	546
Ceiling tight,	418
Manure removed daily,	51
Cows lie down in their dung,	506
Stable well ventilated,	83
Sunlight enter stable,	132

COW YARD

Stable manure scattered so that cattle can lie in it,	353
Pools of manure water in yard,	93

MILK HOUSE

Separate,	530
Windows and doors screened from flies,	272
Provisions for hot water,	0
Milk pails and strainers clean,	0

WATER SUPPLY FOR MILK HOUSE

Polluted,	1
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MILKING

Milkers wear clean covering when milking,	933
Milkers wash hands before milking,	135
Milkers cleanse teats and udders of cows,	19
Milking stools clean,	37
Milkers allow fore milk to go into can,	929
Milk used on hands and teats when milking,	146

HANDLING OF MILK

Milk cooled immediately after milking,	5
Dirty habits noticed,	0

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	4
Tuberculosis,	4
Scarlet fever,	2
Typhoid fever,	6
Dysentery,	0

LEBANON COUNTY.

Total number of dairies inspected,	944
Number in sanitary condition,	30
Number in insanitary condition,	914

CLEANLINESS OF COWS

Teats clean,	No. 49
Udders clean,	62
Flanks clean,	252
Tails clean,	236

WATER SUPPLY FOR CATTLE

Polluted,	Yes. 4
Can cattle wade in polluted water,	11

STABLE

Floor of stable clean and dry,	129
Ceiling clean,	302
Ceiling tight,	171
Manure removed daily,	205
Cows lie down in their dung,	405
Stable well ventilated,	41
Sunlight enter stable,	79

COW YARD

Stable manure scattered so that cattle can lie in it,	172
Pools of manure water in yard,	140

MILK HOUSE

Separate,	650
Windows and doors screened from flies,	620
Provisions for hot water,	3
Milk pails and strainers clean,	0

WATER SUPPLY FOR MILK HOUSE

Polluted,	0
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MILKING

Milkers wear clean covering when milking,	77
Milkers wash hands before milking,	19
Milkers cleanse teats and udders of cows,	22
Milking stools clean,	16
Milkers allow fore milk to go into can,	325
Milk used on hands and teats when milking,	329

HANDLING OF MILK

Milk cooled immediately after milking,	156
Dirty habits noticed,	1

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	0
Tuberculosis,	0
Scarlet fever,	1
Typhoid fever,	2
Dysentery,	0

LEHIGH COUNTY.

Total number of dairies inspected,	994
Number in sanitary condition,	247
Number in insanitary condition,	747

CLEANLINESS OF COWS

Teats clean,	No. 43
Udders clean,	97
Flanks clean,	291
Tails clean,	300

WATER SUPPLY FOR CATTLE

Polluted,	Yes. 5
Can cattle wade in polluted water,	4

STABLE

Floor of stable clean and dry,	151
Ceiling clean,	330
Ceiling tight,	351
Manure removed daily,	214
Cows lie down in their dung,	457
Stable well ventilated,	88
Sunlight enter stable,	88

COW YARD

Stable manure scattered so that cattle can lie in it,	521
Pools of manure water in yard,	96

MILK HOUSE

Separate,	334
Windows and doors screened from flies,	11
Provisions for hot water,	0
Milk pails and strainers clean,	1

WATER SUPPLY FOR MILK HOUSE

Polluted,	0
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MILKING

Milkers wear clean covering when milking,	160
Milkers wash hands before milking,	2
Milkers cleanse teats and udders of cows,	1
Milking stools clean,	3
Milkers allow fore milk to go into can,	292
Milk used on hands and teats when milking,	277

HANDLING OF MILK

Milk cooled immediately after milking,	8
Dirty habits noticed,	3

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	13
Tuberculosis,	0
Scarlet fever,	7
Typhoid fever,	2
Dysentery,	3

LUZERNE COUNTY.

Total number of dairies inspected,	737
Number in sanitary condition,	58
Number in insanitary condition,	679

CLEANLINESS OF COWS

Teats clean,	No. 22
Udders clean,	26
Flanks clean,	178
Tails clean,	189

WATER SUPPLY FOR CATTLE

Yes.	
Polluted,	4
Can cattle wade in polluted water,	3

STABLE

Floor of stable clean and dry,	93
Ceiling clean,	235
Ceiling tight,	257
Manure removed daily,	37
Cows lie down in their dung,	220
Stable well ventilated,	50
Sunlight enter stable,	80

COW YARD

Stable manure scattered so that cattle can lie in it,	383
Pools of manure water in yard,	69

MILK HOUSE

Separate,	243
Windows and doors screened from flies,	170
Provisions for hot water,	1
Milk pails and strainers clean,	0

WATER SUPPLY FOR MILK HOUSE

Polluted,	1
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MILKING

Milkers wear clean covering when milking,	419
Milkers wash hands before milking,	3
Milkers cleanse teats and udders of cows,	3
Milking stools clean,	22
Milkers allow fore milk to go into can,	282
Milk used on hands and teats when milking,	88

HANDLING OF MILK

Milk cooled immediately after milking,	0
Dirty habits noticed,	5

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	2
Tuberculosis,	1
Scarlet fever,	5
Typhoid fever,	3
Dysentery,	1

LYCOMING COUNTY.

Total number of dairies inspected,	1,129
Number in sanitary condition,	68
Number in insanitary condition,	1,061

CLEANLINESS OF COWS

Teats clean,	No. 49
Udders clean,	71
Flanks clean,	355
Tails clean,	366

WATER SUPPLY FOR CATTLE

Polluted,	Yes. 2
Can cattle wade in polluted water,	0

STABLE

Floor of stable clean and dry,	110
Ceiling clean,	507
Ceiling tight,	343
Manure removed daily,	51
Cows lie down in their dung,	308
Stable well ventilated,	169
Sunlight enter stable,	197

COW YARD

Stable manure scattered so that cattle can lie in it,	819
Pools of manure water in yard,	116

MILK HOUSE

Separate,	255
Windows and doors screened from flies,	0
Provisions for hot water,	0
Milk pails and strainers clean,	0

WATER SUPPLY FOR MILK HOUSE

Polluted,	0
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MILKING

Milkers wear clean covering when milking,	899
Milkers wash hands before milking,	1
Milkers cleanse teats and udders of cows,	0
Milking stools clean,	0
Milkers allow fore milk to go into can,	598
Milk used on hands and teats when milking,	90

HANDLING OF MILK

Milk cooled immediately after milking,	0
Dirty habits noticed,	0

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	11
Tuberculosis,	2
Scarlet fever,	3
Typhoid fever,	3
Dysentery,	2

McKEAN COUNTY.

Total number of dairies inspected,	518
Number in sanitary condition,	5
Number in insanitary condition,	513
CLEANLINESS OF COWS	No.
Teats clean,	17
Udder clean,	23
Flanks clean,	112
Tails clean,	141
WATER SUPPLY FOR CATTLE	Yes.
Polluted,	0
Can cattle wade in polluted water,	1
STABLE	
Floor of stable clean and dry,	58
Ceiling clean,	126
Ceiling tight,	159
Manure removed daily,	9
Cows lie down in their dung,	84
Stable well ventilated,	40
Sunlight enter stable,	67
COW YARD	
Stable manure scattered so that cattle can lie in it,	77
Pools of manure water in yard,	18
MILK HOUSE	
Separate,	331
Windows and doors screened from flies,	27
Provisions for hot water,	0
Milk pails and strainers clean,	0
WATER SUPPLY FOR MILK HOUSE	
Polluted,	0
MILKING	
Milkers wear clean covering when milking,	317
Milkers wash hands before milking,	24
Milkers cleanse teats and udders of cows,	7
Milking stools clean,	7
Milkers allow fore milk to go into can,	299
Milk used on hands and teats when milking,	69
HANDLING OF MILK	
Milk cooled immediately after milking,	287
Dirty habits noticed,	0
CONTAGIOUS DISEASES WITHIN YEAR	
Diphtheria,	0
Tuberculosis,	1
Scarlet fevr,	0
Typhoid fever,	2
Dysentery,	0

MERCER COUNTY.

Total number of dairies inspected,	1,322
Number in sanitary condition,	38
Number in insanitary condition,	1,284
CLEANLINESS OF COWS	No.
Teats clean,	64
Udders clean,	93
Flanks clean,	369
Tails clean,	405
WATER SUPPLY FOR CATTLE	Yes.
Polluted,	7
Can cattle wade in polluted water,	20

STABLE

Floor of stable clean and dry,	177
Ceiling clean,	718
Ceiling tight,	565
Manure removed daily,	98
Cows lie down in their dung,	366
Stable well ventilated,	95
Sunlight enter stable,	299

COW YARD

Stable manure scattered so that cattle can lie in it,	173
Pools of manure water in yard,	93

MILK HOUSE

Separate,	503
Windows and doors screened from flies,	493
Provisions for hot water,	0
Milk pails and strainers clean,	1

WATER SUPPLY FOR MILK HOUSE

Polluted,	0
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MILKING

Milkers wear clean covering when milking,	1,127
Milkers wash hands before milking,	66
Milkers cleanse teats and udders of cows,	20
Milking stools clean,	33
Milkers allow fore milk to go into can,	509
Milk used on hands and teats when milking,	138

HANDLING OF MILK

Milk cooled immediately after milking,	287
Dirty habits noticed,	14

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	2
Tuberculosis,	4
Scarlet fever,	7
Typhoid fever,	6
Dysentery,	0

MIFFLIN COUNTY.

Total number of dairies inspected,	620
Number in sanitary condition,	57
Number in insanitary condition,	563

CLEANLINESS OF COWS

Teats clean,	No. 42
Udders clean,	68
Flanks clean,	226
Tails clean,	210

WATER SUPPLY FOR CATTLE

	Yes.
Polluted,	11
Can cattle wade in polluted water,	11

STABLE

Floor of stable clean and dry,	124
Ceiling clean,	235
Ceiling tight,	103
Manure removed daily,	144
Cows lie down in their dung,	271
Stable well ventilated,	105
Sunlight enter stable,	229

COW YARD

Stable manure scattered so that cattle can lie in it,	249
Pools of manure water in yard,	87

MILK HOUSE

Separate,	209
Windows and doors screened from flies,	209
Provisions for hot water,	24
Milk pails and strainers clean,	21

WATER SUPPLY FOR MILK HOUSE

Polluted,	9
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MILKING

Milkers wear clean covering when milking,	213
Milkers wash hands before milking,	32
Milkers cleanse teats and udders of cows,	30
Milking stools clean,	0
Milkers allow fore milk to go into can,	361
Milk used on hands and teats when milking,	145

HANDLING OF MILK

Milk cooled immediately after milking,	111
Dirty habits noticed,	0

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	0
Tuberculosis,	5
Scarlet fever,	2
Typhoid fever,	1
Dysentery,	2

MONROE COUNTY.

Total number of dairies inspected,	408
Number in sanitary condition,	52
Number in insanitary condition,	356

CLEANLINESS OF COWS

Teats clean,	No. 12
Udders clean,	21
Flanks clean,	161
Tails clean,	153

WATER SUPPLY FOR CATTLE

	Yes.
Polluted,	0
Can cattle wade in polluted water,	1

STABLE

Floor of stable clean and dry,	41
Ceiling clean,	259
Ceiling tight,	251
Manure removed daily,	26
Cows lie down in their dung,	180
Stable well ventilated,	33
Sunlight enter stable,	138

COW YARD

Stable manure scattered so that cattle can lie in it.	208
Pools of manure water in yard,	23

MILK HOUSE

Separate,	204
Windows and doors screened from flies,	134
Provisions for hot water,	1
Milk pails and strainers clean,	0

WATER SUPPLY FOR MILK HOUSE

Polluted,	0
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MILKING

Milkers wear clean covering when milking,	104
Milkers wash hands before milking,	13
Milkers cleanse teats and udders of cows,	0
Milking stools clean,	34
Milkers allow fore milk to go into can,	101
Milk used on hands and teats when milking,	22

HANDLING OF MILK

Milk cooled immediately after milking,	0
Dirty habits noticed,	2

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	1
Tuberculosis,	0
Scarlet fever,	3
Typhoid fever,	0
Dysentery,	0

MONTGOMERY COUNTY.

Total number of dairies inspected,	1,740
Number in sanitary condition,	101
Number in insanitary condition,	1,639

CLEANLINESS OF COWS

Teats clean,	No. 72
Udders clean,	144
Flanks clean,	654
Tails clean,	613

WATER SUPPLY FOR CATTLE

	Yes.
Polluted,	10
Can cattle wade in polluted water,	6

STABLE

Floor of stable clean and dry,	202
Ceiling clean,	626
Ceiling tight,	703
Manure removed daily,	252
Cows lie down in their dung,	1,051
Stable well ventilated,	196
Sunlight enter stable,	200

COW YARD

Stable manure scattered so that cattle can lie in it,	481
Pools of manure water in yard,	183

MILK HOUSE

Separate,	983
Windows and doors screened from flies,	748
Provisions for hot water,	77
Milk pails and strainers clean,	13

WATER SUPPLY FOR MILK HOUSE

Polluted,	2
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MILKING

Milkers wear clean covering when milking,	364
Milkers wash hands before milking,	94
Milkers cleanse teats and udders of cows,	49
Milking stools clean,	204
Milkers allow fore milk to go into can,	374
Milk used on hands and teats when milking,	695

HANDLING OF MILK

Milk cooled immediately after milking,	53
Dirty habits noticed,	4

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	1
Tuberculosis,	2
Scarlet fever,	1
Typhoid fever,	1
Dysentery,	0

MONTGOMERY COUNTY.

Total number of dairies inspected,	505
Number in sanitary condition,	4
Number in insanitary condition,	501

CLEANLINESS OF COWS

Teats clean,	No. 6
Udders clean,	24
Flanks clean,	286
Tails clean,	277

WATER SUPPLY FOR CATTLE

	Yes.
Polluted,	2
Can cattle wade in polluted water,	4

STABLE

Floor of stable clean and dry,	59
Ceiling clean,	407
Ceiling tight,	387

Manure removed daily,		35
Cows lie down in their dung,	376	
Stable well ventilated,		128
Sunlight enter stable,		182
COW YARD		
Stable manure scattered so that cattle can lie in it,	435	
Pools of manure water in yard,	46	
MILK HOUSE		
Separate,		203
Windows and doors screened from flies,		60
Provisions for hot water,		0
Milk pails and strainers clean,		0
WATER SUPPLY FOR MILK HOUSE		
Polluted,	1	
MILKING		
Milkers wear clean covering when milking,		97
Milkers wash hands before milking,		11
Milkers cleanse teats and udders of cows,		10
Milking stools clean,		19
Milkers allow fore milk to go into can,	413	
Milk used on hands and teats when milking,	62	
HANDLING OF MILK		
Milk cooled immediately after milking,		211
Dirty habits noticed,	0	
CONTAGIOUS DISEASES WITHIN YEAR		
Diphtheria,	1	
Tuberculosis,	0	
Scarlet fever,	1	
Typhoid fever,	0	
Dysentery,	0	

NORTHAMPTON COUNTY.

Total number of dairies inspected,		1,260
Number in sanitary condition,		73
Number in insanitary condition,		1,187
CLEANLINESS OF COWS		No.
Teats clean,		22
Udders clean,		44
Flanks clean,		488
Tails clean,		621
WATER SUPPLY FOR CATTLE		Yes.
Polluted,	14	
Can cattle wade in polluted water,	22	
STABLE		
Floor of stable clean and dry,		350
Ceiling clean,		794
Ceiling tight,		769
Manure removed daily,		205
Cows lie down in their dung,	759	
Stable well ventilated,		122
Sunlight enter stable,		255
COW YARD		
Stable manure scattered so that cattle can lie in it,	781	
Pools of manure water in yard,	66	
MILK HOUSE		
Separate,		765
Windows and doors screened from flies,		238
Provisions for hot water,		275
Milk pails and strainers clean,		1
WATER SUPPLY FOR MILK HOUSE		
Polluted,	4	
MILKING		
Milkers wear clean covering when milking,		364
Milkers wash hands before milking,		72
Milkers cleanse teats and udders of cows,		4

Milking stools clean,		21
Milkers allow fore milk to go into can,	581	
Milk used on hands and teats when milking,	187	

HANDLING OF MILK

Milk cooled immediately after milking,		48
Dirty habits noticed,	0	

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	6
Tuberculosis,	3
Scarlet fever,	2
Typhoid fever,	2
Dysentery,	0

NORTHUMBERLAND COUNTY.

Total number of dairies inspected,	754
Number in sanitary condition,	52
Number in insanitary condition,	702

CLEANLINESS OF COWS

Teats clean,	No. 21
Udders clean,	29
Flanks clean,	266
Tails clean,	185

WATER SUPPLY FOR CATTLE

	Yes.
Polluted,	1
Can cattle wade in polluted water,	3

STABLE

Floor of stable clean and dry,	101
Ceiling clean,	227
Ceiling tight,	154
Manure removed daily,	190
Cows lie down in their dung,	415
Stable well ventilated,	19
Sunlight enter stable,	25

COW YARD

Stable manure scattered so that cattle can lie in it,	530
Pools of manure water in yard,	79

MILK HOUSE

Separate,	189
Windows and doors screened from flies,	72
Provisions for hot water,	1
Milk pails and strainers clean,	0

WATER SUPPLY FOR MILK HOUSE

Polluted,	0
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MILKING

Milkers wear clean covering when milking,	259
Milkers, wash hands before milking,	12
Milkers cleanse teats and udders of cows,	10
Milking stools clean,	50
Milkers allow fore milk to go into can,	192
Milk used on hands and teats when milking,	24

HANDLING OF MILK

Milk cooled immediately after milking,	153
Dirty habits noticed,	0

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	2
Tuberculosis,	1
Scarlet fever,	1
Typhoid fever,	3
Dysentery,	0

PERRY COUNTY.

Total number of dairies inspected,	481
Number in sanitary condition,	14
Number in insanitary condition,	467

CLEANLINESS OF COWS

	No.
Teats clean,	20
Udders clean,	50
Flanks clean,	211
Tails clean,	232

WATER SUPPLY FOR CATTLE

	Yes.
Polluted,	13
Can cattle wade in polluted water,	8

STABLE

Floor of stable clean and dry,	72
Ceiling clean,	269
Ceiling tight,	192
Manure removed daily,	138
Cows lie down in their dung,	319
Stable well ventilated,	30
Sunlight enter stable,	52

COW YARD

Stable manure scattered so that cattle can lie in it,	358
Pools of manure water in yard,	15

MILK HOUSE

Separate,	151
Windows and doors screened from flies,	84
Provisions for hot water,	2
Milk pails and strainers clean,	0

WATER SUPPLY FOR MILK HOUSE

Polluted,	1
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MILKING

Milkers wear clean covering when milking,	259
Milkers wash hands before milking,	22
Milkers cleanse teats and udders of cows,	6
Milking stools clean,	10
Milkers allow fore milk to go into can,	316
Milk used on hands and teats when milking,	48

HANDLING OF MILK

Milk cooled immediately after milking,	93
Dirty habits noticed,	0

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	1
Tuberculosis,	0
Scarlet fever,	0
Typhoid fever,	2
Dysentery,	0

PIKE COUNTY.

Total number of dairies inspected,	126
Number in sanitary condition,	0
Number in insanitary condition,	126

CLEANLINESS OF COWS

	No.
Teats clean,	1
Udders clean,	2
Flanks clean,	40
Tails clean,	73

WATER SUPPLY FOR CATTLE

	Yes.
Polluted,	8
Can cattle wade in polluted water,	4

STABLE

Floor of stable clean and dry,	9
Ceiling clean,	28
Ceiling tight,	38
Manure removed daily,	3
Cows lie down in their dung,	74
Stable well ventilated,	6
Sunlight enter stable,	12

COW YARD

Stable manure scattered so that cattle can lie in it,	20
Pools of manure water in yard,	10

MILK HOUSE

Separate,	60
Windows and doors screened from flies,	24
Provisions for hot water,	0
Milk pails and strainers clean,	0

WATER SUPPLY FOR MILK HOUSE

Polluted,	0
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MILKING

Milkers wear clean covering when milking,	105
Milkers wash hands before milking,	8
Milkers cleanse teats and udders of cows,	4
Milking stools clean,	2
Milkers allow fore milk to go into can,	109
Milk used on hands and teats when milking,	33

HANDLING OF MILK

Milk cooled immediately after milking,	4
Dirty habits noticed,	0

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	
Tuberculosis,	
Scarlet fever,	
Typhoid fever,	
Dysentery,	

POTTER COUNTY.

Total number of dairies inspected,	523
Number in sanitary condition,	28
Number in insanitary condition,	495

CLEANLINESS OF COWS

Teats clean,	No. 49
Udders clean,	78
Flanks clean,	211
Tails clean,	226

WATER SUPPLY FOR CATTLE

Polluted,	Yes. 6
Can cattle wade in polluted water,	5

STABLE

Floor of stable clean and dry,	161
Ceiling clean,	305
Ceiling tight,	219
Manure removed daily,	14
Cows lie down in their dung,	198
Stable well ventilated,	120
Sunlight enter stable,	148

COW YARD

Stable manure scattered so that cattle can lie in it,	50
Pools of manure water in yard,	26

MILK HOUSE

Separate,	209
Windows and doors screened from flies,	42
Provisions for hot water,	2
Milk pails and strainers clean,	0

WATER SUPPLY FOR MILK HOUSE

Polluted,	0
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MILKING

Milkers wear clean covering when milking,	341
Milkers wash hands before milking,	20
Milkers cleanse teats and udders of cows,	211
Milking stools clean,	126
Milkers allow fore milk to go into can,	304
Milk used on hands and teats when milking,	37

HANDLING OF MILK

Milk cooled immediately after milking,	154
Dirty habits noticed,	1

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	1
Tuberculosis,	1
Scarlet fever,	12
Typhoid fever,	3
Dysentery,	0

SCHUYLKILL COUNTY.

Total number of dairies inspected,	1,029
Number in sanitary condition,	99
Number in insanitary condition,	930

CLEANLINESS OF COWS

Teats clean,	No. 22
Udders clean,	70
Flanks clean,	372
Tails clean,	285

WATER SUPPLY FOR CATTLE

	Yes.
Polluted,	4
Can cattle wade in polluted water,	4

STABLE

Floor of stable clean and dry,	116
Ceiling clean,	440
Ceiling tight,	294
Manure removed daily,	335
Cows lie down in their dung,	395
Stable well ventilated,	116
Sunlight enter stable,	245

COW YARD

Stable manure scattered so that cattle can lie in it,	402
Pools of manure water in yard,	104

MILK HOUSE

Separate,	414
Windows and doors screened from flies,	227
Provisions for hot water,	0
Milk pails and strainers clean,	0

WATER SUPPLY FOR MILK HOUSE

Polluted,	0
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MILKING

Milkers wear clean covering when milking,	155
Milkers wash hands before milking,	1
Milkers cleanse teats and udders of cows,	3
Milking stools clean,	2
Milkers allow fore milk to go into cans,	259
Milk used on hands and teats when milking,	128

HANDLING OF MILK

Milk cooled immediately after milking,	361
Dirty habits noticed,	18

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	6
Tuberculosis,	0
Scarlet fever,	4
Typhoid fever,	3
Dysentery,	0

SNYDER COUNTY.

Total number of dairies inspected,	210
Number in sanitary condition,	41
Number in insanitary condition,	169

CLEANLINESS OF COWS

No.
6
10
41
34

Teats clean,	
Udders clean,	
Flanks clean,	
Tails clean,	

WATER SUPPLY FOR CATTLE

Yes.

Polluted,	0
Can cattle wade in polluted water,	0

STABLE

Floor of stable clean and dry,	38
Ceiling clean,	51
Ceiling tight,	43
Manure removed daily,	64
Cows lie down in their dung,	95
Stable well ventilated,	28
Sunlight enter stable,	45

COW YARD

Stable manure scattered so that cattle can lie in it,	79
Pools of manure water in yard,	45

MILK HOUSE

Separate,	35
Windows and doors screened from flies,	24
Provisions for hot water,	0
Milk pails and strainers clean,	0

WATER SUPPLY FOR MILK HOUSE

Polluted,	0
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MILKING

Milkers wear clean covering when milking,	74
Milkers wash hands before milking,	1
Milkers cleanse teats and udders of cows,	1
Milking stools clean,	0
Milkers allow fore milk to go into can,	99
Milk used on hands and teats when milking,	42

HANDLING OF MILK

Milk cooled immediately after milking,	0
Dirty habits noticed,	0

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	1
Tuberculosis,	2
Scarlet fever,	0
Typhoid fever,	1
Dysentery,	0

SOMERSET COUNTY.

Total number of dairies inspected,	852
Number in sanitary condition,	29
Number in insanitary condition,	823

CLEANLINESS OF COWS

No.

Teats clean,	52
Udders clean,	79
Flanks clean,	324
Tails clean,	680

WATER SUPPLY FOR CATTLE

Yes.

Polluted,	0
Can cattle wade in polluted water,	0

STABLE

Floor of stable clean and dry,	162
Ceiling clean,	395
Ceiling tight,	392
Manure removed daily,	109
Cows lie down in their dung,	460
Stable well ventilated,	91
Sunlight enter stable,	177

COW YARD

Stable manure scattered so that cattle can lie in it,	156
Pools of manure water in yard,	70

MILK HOUSE

Separate,	257
Windows and doors screened from flies,	129
Provisions for hot water,	0
Milk pails and strainers clean,	0

WATER SUPPLY FOR MILK HOUSE

Polluted,	0
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MILKING

Milkers wear clean covering when milking,	237
Milkers wash hands before milking,	98
Milkers cleanse teats and udders of cows,	13
Milking stools clean,	17
Milkers allow fore milk to go into can,	537
Milk used on hands and teats when milking,	426

HANDLING OF MILK

Milk cooled immediately after milking,	47
Dirty habits noticed,	1

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	1
Tuberculosis,	1
Scarlet fever,	2
Typhoid fever,	7
Dysentery,	1

SULLIVAN COUNTY.

Total number of dairies inspected,	75
Number in sanitary condition,	3
Number in insanitary condition,	72

CLEANLINESS OF COWS

Teats clean,	No. 1
Udders clean,	1
Flanks clean,	17
Tails clean,	14

WATER SUPPLY FOR CATTLE

Polluted,	Yes. 0
Can cattle wade in polluted water,	0

STABLE

Floor of stable clean and dry,	13
Ceiling clean,	16
Ceiling tight,	19
Manure removed daily,	6
Cows lie down in their dung,	24
Stable well ventilated,	19
Sunlight enter stable,	34

COW YARD

Stable manure scattered so that cattle can lie in it,	52
Pools of manure water in yard,	1

MILK HOUSE

Separate,	38
Windows and doors screened from flies,	15
Provisions for hot water,	0
Milk pails and strainers clean,	0

WATER SUPPLY FOR MILK HOUSE

Polluted,	0
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MILKING

Milkers wear clean covering when milking,	64
Milkers wash hands before milking,	18
Milkers cleanse teats and udders of cows,	1
Milking stools clean,	3
Milkers allow fore milk to go into can,	55
Milk used on hands and teats when milking,	8

HANDLING OF MILK

Milk cooled immediately after milking,	2
Dirty habits noticed,	0

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	0
Tuberculosis,	0
Scarlet fever,	0
Typhoid fever,	2
Dysentery,	0

SUSQUEHANNA COUNTY.

Total number of dairies inspected,	1,857
Number in sanitary condition,	431
Number in insanitary condition,	1,426

CLEANLINESS OF COWS

	No.
Teats clean,	36
Udders clean,	49
Flanks clean,	491
Tails clean,	548

WATER SUPPLY FOR CATTLE

	Yes.
Polluted,	0
Can cattle wade in polluted water,	0

STABLE

Floor of stable clean and dry,	215
Ceiling clean,	502
Ceiling tight,	409
Manure removed daily,	57
Cows lie down in their dung,	69
Stable well ventilated,	178
Sunlight enter stable,	189

COW YARD

Stable manure scattered so that cattle can lie in it,	196
Pools of manure water in yard,	161

MILK HOUSE

Separate,	845
Windows and doors screened from flies,	11
Provisions for hot water,	0
Milk pails and strainers clean,	1

WATER SUPPLY FOR MILK HOUSE

Polluted,	0
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MILKING

Milkers wear clean covering when milking,	1,264
Milkers wash hands before milking,	1
Milkers cleanse teats and udders of cows,	16
Milking stools clean,	1
Milkers allow fore milk to go into can,	1,015
Milk used on hands and teats when milking,	65

HANDLING OF MILK

Milk cooled immediately after milking,	5
Dirty habits noticed,	12

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	6
Tuberculosis,	3
Scarlet fever,	2
Typhoid fever,	2
Dysentery,	1

TIOGA COUNTY.

Total number of dairies inspected,	2,378
Number in sanitary condition,	68
Number in insanitary condition,	2,310

CLEANLINESS OF COWS

	No.
Teats clean,	139
Udders clean,	190
Flanks clean,	1,000
Tails clean,	1,059

WATER SUPPLY FOR CATTLE

	Yes.
Polluted,	1
Can cattle wade in polluted water,	0

STABLE

Floor of stable clean and dry,	605
Ceiling clean,	1,336
Ceiling tight,	1,234
Manure removed daily,	105
Cows lie down in their dung,	520
Stable well ventilated,	315
Sunlight enter stable,	551

COW YARD

Stable manure scattered so that cattle can lie in it,	594
Pools of manure water in yard,	199

MILK HOUSE

Separate,	1,002
Windows and doors screened from flies,	0
Provisions for hot water,	0
Milk pails and strainers clean,	0

WATER SUPPLY FOR MILK HOUSE

Polluted,	0
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MILKING

Milkers wear clean covering when milking,	1,956
Milkers wash hands before milking,	2
Milkers cleanse teats and udders of cows,	12
Milking stools clean,	0
Milkers allow fore milk to go into can,	1,779
Milk used on hands and teats when milking,	108

HANDLING OF MILK

Milk cooled immediately after milking,	4
Dirty habits noticed,	0

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	0
Tuberculosis,	2
Scarlet fever,	1
Typhoid fever,	9
Dysentery,	1

UNION COUNTY.

Total number of dairies inspected,	721
Number in sanitary condition,	107
Number in insanitary condition,	614

CLEANLINESS OF COWS

	No.
Teats clean,	2
Udders clean,	4
Flanks clean,	198
Tails clean,	199

WATER SUPPLY FOR CATTLE

	Yes.
Polluted,	0
Can cattle wade in polluted water,	0

STABLE

Floor of stable clean and dry,	17
Ceiling clean,	108
Ceiling tight,	135
Manure removed daily,	33
Cows lie down in their dung,	517
Stable well ventilated,	14
Sunlight enter stable,	163

COW YARD

Stable manure scattered so that cattle can lie in it,	564
Pools of manure water in yard,	44

MILK HOUSE

Separate,	54
Windows and doors screened from flies,	16
Provisions for hot water,	0
Milk pails and strainers clean,	0

WATER SUPPLY FOR MILK HOUSE

Polluted,	0
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MILKING

Milkers wear clean covering when milking,	277
Milkers wash hands before milking,	2
Milkers cleanse teats and udders of cows,	0
Milking stools clean,	0
Milkers allow fore milk to go into can,	319
Milk used on hands and teats when milking,	54

HANDLING OF MILK

Milk cooled immediately after milking,	2
Dirty habits noticed,	0

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	2
Tuberculosis,	2
Scarlet fever,	2
Typhoid fever,	1
Dysentery,	0

VENANGO COUNTY.

Total number of dairies inspected,	235
Number in sanitary condition,	9
Number in insanitary condition,	226

CLEANLINESS OF COWS

Teats clean,	No. 7
Udders clean,	8
Flanks clean,	78
Tails clean,	83

WATER SUPPLY FOR CATTLE

	Yes.
Polluted,	0
Can cattle wade in polluted water,	0

STABLE

Floor of stable clean and dry,	34
Ceiling clean,	96
Ceiling tight,	106
Manure removed daily,	13
Cows lie down in their dung,	88
Stable well ventilated,	44
Sunlight enter stable,	43

COW YARD

Stable manure scattered so that cattle can lie in it,	26
Pools of manure water in yard,	23

MILK HOUSE

Separate,	43
Windows and doors screened from flies,	0
Provisions for hot water,	0
Milk pails and strainers clean,	0

WATER SUPPLY FOR MILK HOUSE

Polluted,	0
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MILKING

Milkers wear clean covering when milking,	154
Milkers wash hands before milking,	0
Milkers cleanse teats and udders of cows,	0
Milking stools clean,	0
Milkers allow fore milk to go into can,	190
Milk used on hands and teats when milking,	0

HANDLING OF MILK

Milk cooled immediately after milking,	0
Dirty habits noticed,	0

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	0
Tuberculosis,	0
Scarlet fever,	0
Typhoid fever,	1
Dysentery,	0

WARREN COUNTY.

Total number of dairies inspected,	1,223
Number in sanitary condition,	45
Number in insanitary condition,	1,178

CLEANLINESS OF COWS

Teats clean,	No. 48
Udders clean,	103
Flanks clean,	501
Tails clean,	517

WATER SUPPLY FOR CATTLE

	Yes.
Polluted,	17
Can cattle wade in polluted water,	23

STABLE

Floor of stable clean and dry,	321
Ceiling clean,	530
Ceiling tight,	470
Manure removed daily,	62
Cows lie down in their dung,	293
Stable well ventilated,	236
Sunlight enter stable,	204

COW YARD

Stable manure scattered so that cattle can lie in it,	122
Pools of manure water in yard,	55

MILK HOUSE

Separate,	624
Windows and doors screened from flies,	362
Provisions for hot water,	5
Milk pails and strainers clean,	2

WATER SUPPLY FOR MILK HOUSE

Polluted,	3
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MILKING

Milkers wear clean covering when milking,	915
Milkers wash hands before milking,	126
Milkers cleanse teats and udders of cows,	74
Milking stools clean,	78
Milkers allow fore milk to go into can,	674
Milk used on hands and teats when milking,	104

HANDLING OF MILK

Milk cooled immediately after milking,	544
Dirty habits noticed,	4

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	0
Tuberculosis,	3
Scarlet fever,	3
Typhoid fever,	3
Dysentery,	0

WASHINGTON COUNTY.

Total number of dairies inspected,	899
Number in sanitary condition,	39
Number in insanitary condition,	860

CLEANLINESS OF COWS

Teats clean,	No. 118
Udders clean,	138
Flanks clean,	332
Tails clean,	352

WATER SUPPLY FOR CATTLE

	Yes.
Polluted,	5
Can cattle wade in polluted water,	5

STABLE

Floor of stable clean and dry,	195
Ceiling clean,	433
Ceiling tight,	382
Manure removed daily,	45
Cows lie down in their dung,	321
Stable well ventilated,	127
Sunlight enter stable,	121

COW YARD

Stable manure scattered so that cattle can lie in it,	199
Pools of manure water in yard,	135

MILK HOUSE

Separate,	239
Windows and doors screened from flies,	450
Provisions for hot water,	35
Milk pails and strainers clean,	0

WATER SUPPLY FOR MILK HOUSE

Polluted,	2
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MILKING

Milkers wear clean covering when milking,	688
Milkers wash hands before milking,	19
Milkers cleanse teats and udders of cows,	87
Milking stools clean,	206
Milkers allow fore milk to go into can,	547
Milk used on hands and teats when milking,	116

HANDLING OF MILK

Milk cooled immediately after milking,	20
Dirty habits noticed,	76

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	2
Tuberculosis,	1
Scarlet fever,	7
Typhoid fever,	4
Dysentery,	0

WAYNE COUNTY.

Total number of dairies inspected,	1,566
Number in sanitary condition,	191
Number in insanitary condition,	1,375

CLEANLINESS OF COWS

	No.
Teats clean,	57
Udders clean,	61
Flanks clean,	276
Tails clean,	289

WATER SUPPLY FOR CATTLE

	Yes.
Polluted,	0
Can cattle wade in polluted water,	3

STABLE

Floor of stable clean and dry,	136
Ceiling clean,	543
Ceiling tight,	460
Manure removed daily,	125
Cows lie down in their dung,	70
Stable well ventilated,	154
Sunlight enter stable,	310

COW YARD

Stable manure scattered so that cattle can lie in it,	325
Pools of manure water in yard,	103

MILK HOUSE

Separate,	747
Windows and doors screened from flies,	38
Provisions for hot water,	1
Milk pails and strainers clean,	2

WATER SUPPLY FOR MILK HOUSE

Polluted,	0
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MILKING

Milkers wear clean covering when milking,	1,008
Milkers wash hands before milking,	10
Milkers cleanse teats and udders of cows,	4
Milking stools clean,	3
Milkers allow fore milk to go into can,	522
Milk used on hands and teats when milking,	128

HANDLING OF MILK

Milk cooled immediately after milking,	5
Dirty habits noticed,	0

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	1
Tuberculosis,	2
Scarlet fever,	5
Typhoid fever,	1
Dysentery,	0

WESTMORELAND COUNTY.

Total number of dairies inspected,	1,139
Number in sanitary condition,	51
Number in insanitary condition,	1,088

CLEANLINESS OF COWS

Teats clean,	No. 52
Udders clean,	103
Flanks clean,	451
Tails clean,	480

WATER SUPPLY FOR CATTLE

	Yes.
Polluted,	2
Can cattle wade in polluted water,	6

STABLE

Floor of stable clean and dry,	237
Ceiling clean,	545
Ceiling tight,	475
Manure removed daily,	104
Cows lie down in their dung,	387
Stable well ventilated,	121
Sunlight enter stable,	303

COW YARD

Stable manure scattered so that cattle can lie in it,	319
Pools of manure water in yard,	136

MILK HOUSE

Separate,	203
Windows and doors screened from flies,	456
Provisions for hot water,	0
Milk pails and strainers clean,	0

WATER SUPPLY FOR MILK HOUSE

Polluted,	1
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MILKING

Milkers wear clean covering when milking,	594
Milkers wash hands before milking,	2
Milkers cleanse teats and udders of cows,	7
Milking stools clean,	3
Milkers allow fore milk to go into can,	556
Milk used on hands and teats when milking,	386

HANDLING OF MILK

Milk cooled immediately after milking,	22
Dirty habits noticed,	37

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	4
Tuberculosis,	1
Scarlet fever,	13
Typhoid fever,	11
Dysentery,	0

WYOMING COUNTY.

Total number of dairies inspected,	643
Number in sanitary condition,	8
Number in insanitary condition,	635

CLEANLINESS OF COWS

Teats clean,	No. 47
Udders clean,	52
Flanks clean,	127
Tails clean,	160

WATER SUPPLY FOR CATTLE

Polluted,	Yes. 0
Can cattle wade in polluted water,	1

STABLE

Floor of stable clean and dry,	102
Ceiling clean,	300
Ceiling tight,	259
Manure removed daily,	20
Cows lie down in their dung,	214
Stable well ventilated,	127
Sunlight enter stable,	125

COW YARD

Stable manure scattered so that cattle can lie in it,	275
Pools of manure water in yard,	150

MILK HOUSE

Separate,	102
Windows and doors screened from flies,	345
Provisions for hot water,	0
Milk pails and strainers clean,	0

WATER SUPPLY FOR MILK HOUSE

Polluted,	0
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MILKING

Milkers wear clean covering when milking,	552
Milkers wash hands before milking,	2
Milkers cleanse teats and udders of cows,	1
Milking stools clean,	0
Milkers allow fore milk to go into can,	366
Milk used on hands and teats when milking,	34

HANDLING OF MILK

Milk cooled immediately after milking,	1
Dirty habits noticed,	26

CONTAGIOUS DISEASES WITHIN YEAR

Diphtheria,	0
Tuberculosis,	0
Scarlet fever,	0
Typhoid fever,	0
Dysentery,	1

YORK COUNTY.

Total number of dairies inspected,	1,971
Number in sanitary condition,	73
Number in insanitary condition,	1,898

CLEANLINESS OF COWS		No.
CLEANLINESS OF COWS		
Teats clean,		38
Udders clean,		68
Flanks clean,		536
Tails clean,		434
WATER SUPPLY FOR CATTLE		Yes.
Polluted,		6
Can cattle wade in polluted water,		17
STABLE		
Floor of stable clean and dry,		150
Ceiling clean,		565
Ceiling tight,		886
Manure removed daily,		580
Cows lie down in their dung,	1,199	
Stable well ventilated,		93
Sunlight enter stable,		262
COW YARD		
Stable manure scattered so that cattle can lie in it,	1,431	
Pools of manure water in yard,	107	
MILK HOUSE		
Separate,		351
Windows and doors screened from flies,		535
Provisions for hot water,		0
Milk pails and strainers clean,		0
WATER SUPPLY FOR MILK HOUSE		
Polluted,	2	
MILKING		
Milkers wear clean covering when milking,		962
Milkers wash hands before milking,		14
Milkers cleanse teats and udders of cows,		6
Milking stools clean,		0
Milkers allow fore milk to go into can,	696	
Milk used on hands and teats when milking,	133	
HANDLING OF MILK		
Milk cooled immediately after milking,		1
Dirty habits noticed,	7	
CONTAGIOUS DISEASES WITHIN YEAR		
Diphtheria,	8	
Tuberculosis,	3	
Scarlet fever,	8	
Typhoid fever,	9	
Dysentery,	1	

TABULATION OF HEALTH OFFICERS' REPORTS.

County.	Forms 34 received.	Premises placarded.	Premises quarantined.	Premises disinfected.	Rooms disinfected.	Air space cu. ft.	Formaldehyde plants used.	Potass. Permanganate used.
Adams,	279	163	135	154	197	354,695	313	314
Allegheny,	903	650	603	598	747	1,112,829	1,048	1,064
Armstrong,	956	565	463	457	848	1,010,778	991	1,051
Beaver,	123	100	125	84	129	155,496	138	176
Bedford,	253	196	150	119	537	646,694	564	539
Berks,	1,104	727	814	750	1,235	1,347,992	1,325	1,302
Blair,	102	102	79	96	197	218,788	223	252
Bradford,	597	500	405	411	534	889,557	929	815
Bucks,	1,011	661	644	671	981	1,020,874	953	1,068
Butler,	271	196	124	186	439	504,046	731	537
Cambria,	840	676	525	1,050	1,337	1,337,329	1,225	1,225
Cameron,	39	31	22	18	89	102,300	87	98
Carbon,	107	105	82	118	318	329,831	333	353
Centre,	94	81	76	99	241	352,854	264	279
Chester,	647	570	566	622	1,158	1,252,335	1,304	1,304
Clarion,	255	138	88	161	419	518,789	673	529
Clearfield,	386	352	320	323	763	1,081,270	929	903
Clinton,	81	33	32	35	94	108,438	101	109
Columbia,	252	193	217	186	415	539,232	460	463
Crawford,	512	349	259	352	757	702,254	821	744
Cumberland,	193	179	174	164	384	372,428	378	384
Dauphin,	365	290	277	240	393	422,575	344	373
Delaware,	232	199	123	186	238	257,871	229	233
Elk,	136	103	97	98	289	337,954	336	336
Erle,	174	181	148	227	571	643,694	581	581
Fayette,	1,857	1,532	1,562	1,292	1,627	2,025,192	1,956	1,953
Forest,	43	15	11	9	44	45,139	50	46
Franklin,	299	241	227	226	555	748,110	786	793
Fulton,	83	59	40	33	85	208,430	117	123
Greene,	35	26	22	28	41	71,012	67	60
Huntingdon,	271	202	168	194	727	704,404	683	616
Indiana,	615	457	434	460	816	964,975	917	917
Jefferson,	252	217	204	223	647	751,653	697	695
Juniata,	92	56	61	57	192	299,149	252	252
Lackawanna,	34	31	37	28	72	79,520	78	76
Lancaster,	712	531	505	548	1,151	1,297,829	1,321	1,329
Lawrence,	313	228	320	309	397	487,462	501	501
Lehigh,	394	287	279	301	732	890,502	828	811
Lehanon,	373	311	335	352	548	551,018	509	501
Luzerne,	452	433	412	445	835	928,723	860	879
Lycoming,	229	183	203	189	329	456,676	488	488
McKean,	233	181	182	169	540	723,853	721	721
Mercer,	227	214	197	181	399	469,255	1,166	447
Mifflin,	143	109	93	113	252	365,745	308	313
Monroe,	29	36	41	20	63	82,300	81	81
Montgomery,	622	544	491	440	805	999,341	1,031	977
Montour,	53	29	27	25	77	125,034	115	116
Northampton,	398	311	299	279	514	658,981	676	671
Northumberland,	229	149	179	160	536	569,500	535	543
Perry,	122	99	81	89	235	202,540	190	192
Pike,	16	10	10	13	41	30,650	27	27
Potter,	203	200	195	154	435	507,687	502	501
Schuylkill,	579	458	461	469	1,098	1,164,321	966	1,048
Snyder,	80	73	21	72	129	149,323	168	168
Somerset,	374	330	258	239	570	703,998	702	698
Sullivan,	62	57	49	48	75	85,621	87	87
Susquehanna,	135	117	111	122	297	462,460	260	265
Tioga,	174	124	104	127	285	332,336	331	337
Union,	28	23	22	19	44	61,806	65	64
Venango,	528	455	1,022	486	973	912,868	901	902
Warren,	291	190	132	156	534	542,614	439	430
Washington,	901	720	662	592	831	1,400,490	1,148	1,103
Wayne,	301	157	111	165	298	453,707	404	423
Westmoreland,	1,244	1,000	970	857	1,263	1,606,886	1,609	1,629
Wyoming,	140	121	123	139	329	440,698	325	328
York,	558	378	299	352	873	996,208	903	907
Total,	23,557	19,259	17,747	17,090	33,915	40,370,777	39,079	38,368

TABULATION OF MEDICAL INSPECTORS' ANNUAL REPORTS.

County.	Varicella.	Typhoid.	Diphtheria.	Scarlet fever.	Epidemic meningitis.	Varicella.	Pertussis.	Measles.	Typhoid.	Varicella.	Diphtheria.	Scarlet fever.	Epidemic meningitis.	Stock transferred.	Sale of milk stopped.
Adams,	5	3	1	4	..	14	..	....	16	..	2	3	..	..	18
Allegheny,	—	97	52	23	..	52	115	59	..	..	..	..	..	..	..
Armstrong, .....	—	—	..	..	..	1	..	..	8	..	..	..	..	..	..
Beaver,	—	—	4	..	..	5	..	5	..	..	..	..	..	..	..
Bedford, .....	—	—	..	..	..	..	..	..	..	..	..	..	..	..	..
Berks,	1	8	8	11	..	10	..	8	16	..	22	27	..	9	8
Blair, .....	—	—	..	..	..	..	..	..	..	..	..	..	..	..	..
Bradford,	—	10	1	7	..	23	14	238	26	..	15	16	..	4	8
Butler, .....	—	—	..	..	..	..	..	..	1	..	..	..	..	..	1
Cambria,	—	82	73	41	1	22	73	424	..	..	..	..	..	..	..
Cameron, .....	—	—	..	..	..	..	..	..	..	..	..	..	..	..	..
Carbon,	—	6	..	3	..	..	..	12	1	..	..	..	..	..	..
Centre,	—	6	..	..	..	..	..	..	1	..	..	..	..	..	..
Chester,	1	2	..	6	1	2	1	7	..	..	5	2	1	1	..
Clarion,	—	7	..	..	..	9	..	14	..	..	..	..	..	..	..
Clearfield, .....	—	—	..	..	..	..	..	..	..	..	..	..	..	..	..
Clinton, .....	—	—	..	..	..	..	..	..	..	..	..	..	..	..	..
Columbia,	2	6	..	..	..	35	..	..	..	..	..	..	..	..	..
Crawford,	—	—	1	1	..	29	1	25	16	..	4	..	..	5	1
Cumberland,	—	11	23	1	..	6	..	..	16	..	11	8	1	4	9
Dauphin,	1	—	..	..	..	..	..	..	2	..	..	..	..	..	..
Delaware,	7	6	..	22	..	10	..	..	4	..	6	2	..	..	..
Elk,	—	2	3	2	..	..	..	..	4	..	6	2	..	..	..
Erle,	—	—	..	2	..	1	7	..	..	..	..	..	..	..	..
Fayette,	2	27	10	..	..	..	..	25	..	..	..	..	..	..	..
Forest, .....	—	—	..	..	..	..	..	..	..	..	..	..	..	..	..
Franklin,	68	7	2	16	..	18	1	2	25	1	17	..	..	2	19
Fulton,	—	1	3	..	..	17	..	..	5	..	..	..	..	..	..
Greene,	—	7	5	1	..	..	1	5	..	..	..	..	..	..	..
Huntingdon,	—	—	..	4	..	9	3	1	1	1	1	1	..	..	..
Indiana,	17	..	11	..	..	..	..	..	..	..	..	..	..	1	..
Jefferson,	4	4	31	62	..	8	1	40	..	..	..	..	..	2	3
Juniata,	7	..	1	..	..	..	..	..	..	..	..	..	..	..	..
Lackawanna, .....	—	—	..	..	..	..	..	..	..	..	..	..	..	..	..
Lancaster,	1	—	5	21	..	30	22	..	17	..	16	48	..	1	12
Lawrence,	—	1	4	..	..	7	..	..	..	..	..	..	..	..	..
Lebanon, .....	—	—	..	..	..	7	3	..	15	..	16	9	..	1	..
Lehigh,	—	2	1	11	..	9	..	88	1	4	11	..	..	..	6
Luzerne, .....	—	—	..	..	..	4	..	..	6	..	..	..	..	..	..
Lycoming, .....	—	—	..	..	..	..	..	..	1	..	..	..	..	..	..
McKean,	—	—	..	9	..	..	..	..	..	..	..	..	..	..	..
Mercer,	—	2	2	..	..	2	2	11	2	..	2	..	..	..	..
Mifflin,	—	1	1	..	..	45	2	4	1	..	2	1	..	..	2
Monroe,	—	5	..	..	..	..	..	..	..	..	..	..	..	..	..
Montgomery,	2	1	13	..	..	9	1	19	3	..	3	2	..	4	3
Montour,	8	—	6	..	..	2	..	1	..	..	1	..	..	..	..
Northampton, .....	—	—	..	..	..	..	..	..	2	..	..	..	..	..	..
Northumberland,	2	2	..	..	..	..	4	2	3	..	..	1	..	..	1
Perry,	—	—	..	4	..	5	..	..	1	2	..	..	..	..	..
Pike, .....	—	—	..	..	..	..	..	..	..	..	..	..	..	..	..
Potter,	—	—	..	3	..	..	..	1	..	..	..	..	..	..	..
Schulykill,	—	—	1	14	..	9	3	18	2	..	4	4	..	3	3
Snyder, .....	—	—	..	..	..	..	..	..	..	..	..	..	..	..	..
Somerset,	1	18	6	2	..	9	21	4	..	..	..	..	..	..	..
Sullivan,	—	8	8	10	..	..	1	15	..	..	..	..	..	..	..
Susquehanna,	—	—	..	2	..	..	..	..	1	..	..	..	..	..	1
Tioga,	—	—	6	7	..	2	25	36	12	..	1	4	..	5	5
Union,	1	—	..	..	..	..	..	..	..	..	..	..	..	..	..
Venango,	—	1	..	..	..	18	1	16	..	..	..	1	..	..	..
Warren,	1	2	..	1	..	6	..	..	5	..	2	2	..	..	2
Washington,	—	13	..	4	..	15	..	4	..	..	..	..	..	..	..
Wayne,	—	—	..	2	..	..	..	..	4	..	1	4	..	..	1
Westmoreland,	—	—	5	10	..	24	..	114	2	..	4	..	..	2	..
Wyoming,	—	—	..	5	..	..	5	..	..	..	..	2	..	..	1
York,	—	37	21	7	..	6	..	..	18	..	3	4	..	1	11
Total,	112	404	284	360	2	506	321	1,281	256	1	143	166	2	49	115

Division of Vital Statistics

WILMER R. BATT, M. D., *State Registrar.*



GENERAL SUMMARY.

Deaths registered including stillbirths,	121,118
Births registered including stillbirths,	209,273
Marriages registered,	62,314
Communicable diseases registered,	122,723
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Total records,	515,428
Number of certified copies issued,	3,629
Fees returned to the State for certified copies,	\$1,814.50

MORTALITY.

Deaths for the year, exclusive of stillbirths, were 111,292. The death rate per 100,000 of population was 14.2. The population, total deaths and death rates for six years, 1906 to 1911, inclusive, were as follows:

	1906	1907	1908	1909	1910	1911
Population,	7,141,766	7,279,793	7,417,816	7,555,841	7,693,866	7,831,904
Total deaths,	114,435	115,969	112,346	111,062	119,815	111,292
Death rate,	16.0	15.9	15.1	14.7	15.6	14.2

The decline in the general death rate as compared with the previous year was quite marked and it is noted in every group of diseases with the single exception of affections of the circulatory system, which show practically a stationary rate. As compared with 1910 there was a decrease in the total number of deaths of 8,523 and of this number 6,707 are of persons less than five years of age.

The tables showing the total deaths and death rates per 100,000 of population for certain groups of diseases of the International Classification for the six-year period show some very interesting facts concerning the trend of certain classes of disease. One of the most marked decreases, compared not only with the previous year but with all of the preceding years, is found in diseases of the digestive system. By reference to the tables showing deaths from each specified cause, it will be found that this decrease is very largely due to a decline in infant mortality. The classes of diseases showing the least decrease are those in which the degenerative processes associated with late adult life play the most prominent part.

DEATHS BY MONTHS AND QUARTERS WITH CORRESPONDING ANNUAL RATES PER 1,000 OF POPULATION. (STILLBIRTHS EXCLUDED).

	By Months.		By Quarters.
	Deaths	Rates.	Rates.
January,	10,299	15.8	15.7
February,	9,832	15.1	
March,	10,627	16.3	
April,	10,028	15.4	13.6
May,	8,997	13.8	
June,	7,559	11.6	
July,	8,853	15.1	14.3
August,	8,369	14.3	
September,	8,760	13.4	
October,	8,581	13.1	13.2
November,	8,397	12.7	
December,	9,080	13.9	

TOTAL DEATHS FOR CERTAIN GROUPS OF DISEASE FOR THE YEARS 1906 TO 1911, INCLUSIVE. INTERNATIONAL CLASSIFICATION.

	1906	1907	1908	1909	1910	1911
General diseases,	29,756	29,287	28,575	26,756	28,710	27,495
Diseases of the nervous system,	11,830	12,227	11,372	11,493	11,776	11,064
Diseases of the circulatory system,	10,687	11,777	11,345	12,061	12,755	12,389
Diseases of the respiratory system,	13,840	14,384	13,939	14,837	16,605	14,210
Diseases of the digestive system,	17,263	16,037	16,396	15,769	18,559	17,163
Noven. diseases (genito urinary system),	7,219	7,659	7,553	7,897	8,414	8,292
Puerperal state,	1,213	1,312	1,460	1,434	1,441	1,195
Skin and annexa,	508	515	531	525	504	472
Bones and organs of locomotion,	204	185	214	207	188	176
Malformations,	1,572	1,496	1,544	1,570	1,467	1,345
Early infancy,	5,513	5,604	5,598	5,433	6,127	6,946
Old age,	1,448	1,622	1,494	1,334	1,395	1,437
External causes,	10,180	10,866	9,431	9,145	9,217	9,351
Ill defined diseases,	3,147	2,998	2,691	2,563	2,696	1,081

DEATH RATES PER 100,000 OF POPULATION FOR CERTAIN GROUPS OF DISEASE FOR THE YEARS 1906-1911, INCLUSIVE. INTERNATIONAL CLASSIFICATION.

	1906	1907	1908	1909	1910	1911
General diseases,	416.6	402.3	385.2	354.1	373.1	351.0
Diseases of the nervous system,	166.3	167.9	153.3	152.2	152.4	141.3
Diseases of the circulatory system,	149.3	161.7	152.9	159.6	165.7	165.8
Diseases of the respiratory system,	193.7	197.5	197.7	196.3	215.8	181.4
Diseases of the digestive system,	241.7	220.2	219.8	208.6	241.2	193.7
Noven. diseases (genito urinary system),	101.1	105.2	101.8	104.5	109.3	105.9
Puerperal state,	16.9	18.0	19.6	18.9	18.7	16.5
Bones and organs of locomotion,	7.1	7.1	7.1	6.9	6.5	6.0
Skin and annexa,	2.8	2.5	2.8	2.7	2.4	2.2
Malformations,	22.0	20.6	20.8	20.7	19.1	17.1
Early infancy,	77.2	76.9	75.4	71.9	79.6	78.2
Old age,	20.2	22.2	20.1	18.0	18.1	19.3
External causes,	142.4	149.2	129.8	121.3	119.7	119.4
Ill defined diseases,	44.1	41.1	36.1	33.9	35.0	13.6

DEATH RATES PER 1,000 OF POPULATION AT CORRESPONDING AGES,
1906-1911, INCLUSIVE.

	1906	1907	1908	1909	1910	1911
Under 5 years,	48.5	44.7	45.3	42.1	45.3	37.5
5 to 14 years,	3.3	3.0	3.1	2.7	2.9	2.6
15 to 24 years,	6.1	6.0	5.3	4.6	4.6	4.5
25 to 34 years,	7.9	7.9	7.0	6.3	6.7	6.2
35 to 44 years,	10.1	10.9	9.5	9.3	9.5	9.2
45 to 54 years,	14.8	15.6	14.9	14.5	15.0	14.5
55 to 64 years,	30.2	30.5	27.8	27.5	27.8	27.0
65 to 74 years,	54.4	63.5	58.7	58.0	61.3	60.0
75 to 84 years,	133.4	140.8	134.6	131.5	131.6	125.8
85 years and over,	282.9	308.6	283.7	330.2	330.2	293.0

DEATHS FROM ALL CAUSES BY SEX AND AGE PERIODS.

Ages.	Deaths.			Per cent. of deaths at each age to total at all ages.			Proportional deaths of males to 100 females.
	Total.	Male.	Female.	Total.	Male.	Female.	
All ages,	111,292	60,588	50,704	100.0	100.0	100.0	
Under 1 year,	24,195	13,625	10,570	21.8	22.5	20.8	119
1 to 2 years,	5,698	2,690	2,408	4.6	4.4	4.7	112
2 to 3 years,	2,077	1,091	986	1.9	1.8	1.9	110
3 to 4 years,	1,423	752	671	1.3	1.2	1.3	101
4 to 5 years,	995	518	477	0.9	0.9	0.9	108
Total under 5 years,	33,788	18,676	15,112	30.4	30.8	29.6	124
5 to 9 years,	2,639	1,340	1,290	2.3	2.2	2.5	104
10 to 14 years,	1,553	835	718	1.4	1.4	1.4	116
15 to 19 years,	2,629	1,461	1,168	2.4	2.4	2.3	125
20 to 24 years,	4,024	2,170	1,854	3.6	3.6	3.7	117
25 to 29 years,	4,177	2,344	1,833	3.7	3.9	3.7	128
30 to 34 years,	4,154	2,358	1,796	3.7	3.9	3.5	137
35 to 39 years,	4,812	2,850	1,962	4.3	4.7	3.9	145
40 to 44 years,	4,429	2,689	1,740	4.1	4.5	3.4	155
45 to 49 years,	4,711	2,888	1,823	4.3	4.7	3.6	158
50 to 54 years,	5,294	3,070	2,224	4.7	5.0	4.4	138
55 to 59 years,	5,407	3,106	2,301	4.8	5.1	4.6	135
60 to 64 years,	6,212	3,451	2,761	5.6	5.8	5.4	125
65 to 69 years,	7,054	3,757	3,297	6.3	6.2	6.5	111
70 to 74 years,	6,907	3,451	3,456	6.2	5.7	6.9	100
75 to 79 years,	6,015	2,997	3,108	5.4	4.8	6.1	91
80 to 84 years,	4,264	1,910	2,354	3.8	3.2	4.7	81
85 to 89 years,	2,274	995	1,309	2.0	1.3	2.6	75
90 to 94 years,	749	284	465	.7	.5	.9	61
95 years and over,	190	66	124	.2	.1	.2	53

TYPHOID FEVER.

Deaths from typhoid fever numbered 1,716, a decrease of 176 in number as compared with the previous year. The death rate per

100,000 of population declined from 24.6 to 21.9. The rates for the six-year period, 1906-1911, inclusive, were as follows:

1906	1907	1908	1909	1910	1911
54.8	48.6	33.0	22.7	24.6	21.9

DEATHS FROM TYPHOID FEVER BY SEX AND AGE PERIODS FOR THE YEARS 1906-1911, INCLUSIVE.

	1906	1907	1908	1909	1910	1911
Total at all ages,	3,917	3,538	2,450	1,712	1,892	1,716
Males,	2,393	2,152	1,449	1,023	1,152	1,043
Females,	1,524	1,386	1,001	689	740	673
Under 1 year,	16	17	8	8	3	4
1 to 2 years,	38	19	28	21	10	14
2 to 3 years,	38	30	31	18	22	9
3 to 4 years,	44	42	37	24	13	15
4 to 5 years,	43	34	30	16	29	24
Total under 5 years,	179	142	134	87	77	66
5 to 9 years,	234	155	148	103	111	92
10 to 14 years,	255	221	158	117	124	100
15 to 19 years,	545	515	348	215	252	215
20 to 24 years,	767	663	406	273	324	283
25 to 29 years,	559	524	328	241	253	243
30 to 34 years,	377	355	256	147	190	174
35 to 39 years,	294	291	172	146	134	157
40 to 44 years,	210	187	114	100	102	111
45 to 49 years,	137	154	116	84	89	73
50 to 54 years,	120	113	99	71	86	68
55 to 59 years,	110	80	65	48	60	45
60 to 64 years,	55	51	51	36	29	33
65 to 69 years,	38	40	25	18	25	23
70 to 74 years,	29	30	16	14	17	18
75 to 79 years,	13	13	10	7	10	7
80 to 84 years,	5	3	5	5	6	3
85 years and over,	2	0	2	0	3	0

DIPHTHERIA.

Deaths from diphtheria were 2,111, a decrease of 124 as compared with the previous year. The death rate per 100,000 of population was 27.0.

The death rates for the six-year period, 1906-1911, inclusive, were as follows:

1906	1907	1908	1909	1910	1911
34.1	29.4	26.6	26.5	29.0	27.0

DEATHS FROM DIPHTHERIA BY MONTHS FOR THE YEARS 1906-1911, INCLUSIVE.

	1906	1907	1908	1909	1910	1911
Total,	2,438	2,138	1,970	2,002	2,235	2,111
January,	266	259	221	199	209	203
February,	213	165	207	178	189	188
March,	205	145	173	212	182	199
April,	159	139	133	138	160	150
May,	157	125	92	131	168	115
June,	85	99	95	96	126	98
July,	89	82	84	139	107	107
August,	116	118	108	108	142	81
September,	210	167	154	131	160	156
October,	318	267	225	209	245	272
November,	308	276	232	219	271	284
December,	312	296	246	251	276	258

DEATHS FROM DIPHTHERIA BY SEX AND AGE PERIODS, 1906-1911, INCLUSIVE.

	1906	1907	1908	1909	1910	1911
Total at all ages,	2,438	2,138	1,970	2,002	2,235	2,111
Males,	1,214	1,115	999	1,070	1,136	1,116
Females,	1,224	1,023	971	932	1,099	995
Under 1 year,	173	170	168	139	178	122
1 to 2 years,	373	351	322	367	379	325
2 to 3 years,	363	337	306	334	361	360
3 to 4 years,	319	267	264	283	299	311
4 to 5 years,	303	243	214	227	226	238
Total under 5 years,	1,531	1,373	1,274	1,350	1,443	1,346
5 to 9 years,	648	529	500	477	556	558
10 to 14 years,	141	119	103	94	118	106
15 to 19 years,	44	48	28	20	40	36
20 to 24 years,	18	22	21	14	20	19
25 to 29 years,	15	11	9	11	21	13
30 to 34 years,	14	8	11	7	5	8
35 to 39 years,	8	5	5	6	6	9
40 to 44 years,	3	4	5	3	6	4
45 to 49 years,	4	2	2	5	1	3
50 to 54 years,	2	5	2	5	7	4
55 to 59 years,	0	2	6	2	4	3
60 to 64 years,	0	2	1	1	2	0
65 to 69 years,	4	3	1	3	1	0
70 to 74 years,	2	1	1	1	2	1
75 years and over,	1	2	1	2	3	1

SCARLET FEVER.

Deaths from scarlet fever were 749, a decrease of 345 as compared with the previous year. The death rate per 100,000 of population declined from 14.2 to 9.6. The death rates for the six-year period, 1906-1911, inclusive, were as follows:

1906	1907	1908	1909	1910	1911
8.1	9.0	16.4	16.1	14.2	9.6

DEATHS FROM SCARLET FEVER AT MONTHS FOR THE YEARS 1906-1911, INCLUSIVE.

	1906	1907	1908	1909	1910	1911
Total,	577	657	1,217	1,216	1,094	749
January,	51	65	109	151	127	117
February,	62	63	108	124	112	93
March,	59	57	136	139	109	93
April,	67	40	135	121	103	93
May,	72	39	99	96	115	78
June,	32	42	65	73	98	66
July,	38	29	58	59	64	41
August,	28	41	55	63	71	27
September,	34	52	85	69	58	26
October,	33	63	114	74	63	31
November,	53	77	127	88	87	34
December,	48	89	126	159	82	50

DEATHS FROM SCARLET FEVER BY SEX AND AGE, 1906-1911, INCLUSIVE.

	1906	1907	1908	1909	1910	1911
Total all ages,	577	657	1,217	1,216	1,094	749
Males,	270	326	621	632	501	334
Females,	307	331	596	584	593	365
Under 1 year,	43	26	62	72	64	46
1 to 2 years,	69	50	154	164	126	103
2 to 3 years,	90	100	191	214	180	113
3 to 4 years,	92	89	170	171	150	113
4 to 5 years,	62	79	130	133	137	85
Total under 5 years,	356	394	707	754	637	460
5 to 9 years,	171	192	349	314	308	169
10 to 14 years,	23	38	80	61	67	45
15 to 19 years,	11	11	29	45	24	26
20 to 24 years,	5	10	25	17	16	17
25 to 29 years,	5	5	14	11	11	16
30 to 34 years,	4	3	7	7	6	7
35 years and over,	1	4	6	7	5	9

MEASLES.

Deaths from measles were 804, a decrease of 433 from the previous year. The rate per 100,000 of population declined from 16.1 to 10.3. The rates for the six-year period, 1906-1911, inclusive, were as follows:

1906	1907	1908	1909	1910	1911
20.5	9.8	16.4	14.0	16.1	10.3

DEATHS FROM MEASLES BY MONTHS FOR THE YEARS, 1906-1911, INCLUSIVE.

	1906	1907	1908	1909	1910	1911
Total,	1,463	714	1,215	1,060	1,237	804
January,	99	10	187	80	122	92
February,	136	29	163	81	154	105
March,	164	70	176	145	152	141
April,	186	90	180	163	174	170
May,	173	99	181	171	170	132
June,	155	100	107	86	137	49
July,	122	73	67	73	91	31
August,	98	46	39	54	53	11
September,	93	16	15	27	35	15
October,	88	18	25	38	27	10
November,	86	42	30	48	41	19
December,	63	81	54	94	81	29

DEATHS FROM MEASLES BY SEX AND AGE PERIODS, 1906-1911, INCLUSIVE.

	1906	1907	1908	1909	1910	1911
Total at all ages,	1,463	714	1,215	1,060	1,237	804
Males,	785	380	640	576	664	411
Females,	678	334	575	484	573	393
Under 1 year,	366	206	291	286	306	202
1 to 2 years,	478	231	411	358	404	273
2 to 3 years,	210	112	179	166	201	117
3 to 4 years,	116	48	103	78	105	71
4 to 5 years,	70	31	64	46	67	41
Total under 5 years,	1,240	628	1,048	934	1,083	704
5 to 9 years,	129	51	116	77	98	54
10 to 14 years,	28	9	19	13	16	15
15 to 19 years,	19	4	8	10	14	10
20 to 24 years,	16	8	4	6	6	7
25 to 29 years,	5	2	1	6	4	3
30 to 34 years,	4	2	8	3	6	4
35 to 39 years,	7	3	5	1	4	3
40 to 44 years,	3	2	3	4	3	2
45 to 49 years,	4	4	1	1	0	2
50 years and over,	5	1	2	5	3	1

WHOOPIING COUGH.

Deaths from whooping cough were 998, a decrease of 116 as compared with the previous year. The death rate per 100,000 of population declined from 14.5 to 12.7. The death rates for the six-year period, 1906-1911, inclusive, were as follows:

1906	1907	1908	1909	1910	1911
21.7	17.7	17.0	12.0	14.5	12.7

DEATHS FROM WHOOPING-COUGH BY MONTHS FOR THE YEARS 1906-1911, INCLUSIVE.

	1906	1907	1908	1909	1910	1911
Total,	1,550	1,287	1,264	910	1,114	998
January,	83	73	85	74	64	87
February,	96	91	110	90	79	106
March,	98	98	105	92	102	117
April,	123	118	143	91	106	117
May,	131	111	123	88	90	120
June,	178	112	112	90	75	75
July,	185	154	153	105	117	80
August,	176	173	158	84	140	73
September,	142	145	88	53	105	61
October,	121	85	59	56	83	47
November,	118	63	63	45	78	43
December,	99	64	65	37	75	64

DEATHS FROM WHOOPING-COUGH BY SEX AND AGE PERIODS, 1906-1911, INCLUSIVE.

	1906	1907	1908	1909	1910	1911
Total at all ages,	1,550	1,287	1,264	910	1,114	998
Males,	679	612	532	417	483	468
Females,	871	675	732	493	631	530
Under 1 year,	881	731	679	500	581	567
1 to 2 years,	251	338	312	245	285	259
2 to 3 years,	135	114	122	78	109	75
3 to 4 years,	83	52	77	22	59	42
4 to 5 years,	58	25	32	25	34	17
Total under 5 years,	1,491	1,260	1,222	870	1,068	960
5 to 9 years,	51	20	37	32	41	34
10 years and over,	6	7	5	8	5	4

TUBERCULOSIS.

Deaths from tuberculosis in all forms numbered 10,604, an increase of 319 as compared with the previous year. The forms of tuberculosis with the percentage in each group to total deaths from this cause are as follows:

	Deaths.	Per cent.
Tuberculosis of lungs,	8,832	83.3
Acute miliary tuberculosis,	401	3.8
Tuberculous meningitis,	567	5.3
Abdominal tuberculosis,	413	3.8
Potts' disease,	86	0.8
White swelling,	60	0.6
Tuberculosis of other organs,	171	1.7
Disseminated tuberculosis,	74	.7

TUBERCULOSIS OF THE LUNGS.

Deaths from tuberculosis of the lungs numbered 9,233, an increase of 220 as compared with the previous year. In this connection it should be noted that the number of deaths from tuberculosis of the lungs, as noted above, for 1910, included deaths from active military tuberculosis which were assigned to other forms of tuberculosis prior to that year. The deaths from tuberculosis of the lungs alone in 1910 were 8,775 and for the year 1911, 8,832; the death rates per 100,000 of population for these two years being, respectively, 114.0 and 112.8.

DEATHS FROM TUBERCULOSIS OF THE LUNGS BY MONTHS, 1906-1911, INCLUSIVE

	1906	1907	1908	1909	1910	1911
Total for the year,	9,258	9,317	8,703	8,699	8,775	8,832
January,	739	804	819	767	771	785
February,	766	805	829	750	794	798
March,	980	976	919	936	1,010	870
April,	875	965	786	848	838	896
May,	836	829	795	838	732	785
June,	704	727	692	668	646	761
July,	708	717	655	667	685	685
August,	740	698	624	592	667	668
September,	645	594	626	572	616	597
October,	766	792	586	654	655	579
November,	673	679	683	691	676	654
December,	825	821	689	716	705	754

DEATHS FROM TUBERCULOSIS OF THE LUNGS BY SEX AND AGE PERIODS, 1906-1911, INCLUSIVE

	1906	1907	1908	1909	1910	1911
Total at all ages,	9,258	9,317	8,703	8,699	8,775	8,832
Males,	4,786	4,896	4,691	4,721	4,754	4,814
Females,	4,472	4,421	4,012	3,978	4,021	4,018
Under 1 year,	212	233	167	131	138	352
1 to 2 years,	103	96	92	95	87	201
2 to 3 years,	56	51	54	41	47	109
3 to 4 years,	29	36	31	36	18	86
4 to 5 years,	27	23	25	24	20	73
Total under 5 years,	427	445	369	330	310	821
5 to 9 years,	89	92	88	83	69	78
10 to 14 years,	166	174	141	154	121	116
15 to 19 years,	784	679	617	631	580	610
20 to 24 years,	1,207	1,207	1,158	1,183	1,119	1,142
25 to 29 years,	1,249	1,175	1,165	1,212	1,215	1,171
30 to 34 years,	1,129	1,112	1,055	1,078	1,104	1,070
35 to 39 years,	1,035	1,014	965	938	999	1,022
40 to 44 years,	732	791	766	698	822	791
45 to 49 years,	617	552	632	623	595	613
50 to 54 years,	473	516	496	474	506	511
55 to 59 years,	404	408	365	370	408	401
60 to 64 years,	319	383	297	348	321	240
65 to 69 years,	243	261	250	244	246	311
70 to 74 years,	194	213	171	171	184	151
75 to 79 years,	118	123	109	92	96	111
80 to 84 years,	32	39	40	48	40	36
85 years and over,	14	16	18	20	10	25
Unknown age,	25	7	1	1	0	0

CANCER.

Deaths from cancer in all forms numbered 5,197, an increase of 97 as compared with the previous year. The death rate per 100,000 of population increased but slightly, from 66.3 to 66.4. The distribution by locality or organ affected was as follows:

	1906	1907	1908	1909	1910	1911
Total,	4,208	4,420	4,520	4,845	5,100	5,197
Cancer of the buccal cavity,	160	114	177	185	207	192
Cancer of the stomach, liver,	1,620	1,666	1,733	2,008	2,093	2,113
Cancer of the peritoneum, intestines,	440	488	502	570	599	658
Cancer of the female genital organs,	595	640	738	714	768	833
Cancer of the breast,	399	368	452	503	513	480
Cancer of the skin,	160	188	169	217	176	181
Cancer of other unspecified organs,	834	926	749	649	739	720

DISEASES OF THE NERVOUS SYSTEM.

Deaths from diseases of the nervous system and the organs of special senses numbered 11,064, a decrease of 662 as compared with the previous year. The death rate per 100,000 of population declined from 152.4 to 151.3. In this group deaths of males were 5,893, females, 5,171. Apoplexy was responsible for 6,108 deaths (or 55.2 per cent. of the total) of which number 3,095 were males and 3,013 were females. Acute anterior poliomyelitis caused 93 deaths as compared with 269 the previous year. Out of this number 61 were under five years of age.

DISEASES OF THE CIRCULATORY SYSTEM.

Deaths from diseases of this class were 12,989, an increase of 234 as compared with the previous year, deaths of males numbering 6,911, females 6,078. The rate per 100,000 of population, 165.8, remained stationary.

Organic disease of the heart was responsible for 10,103 deaths or 77.7 per cent. of the total. The death rate from this single cause was 129.0 as compared with 128.7 for the previous year. Deaths of males were 5,314, of females 4,789.

DISEASES OF THE RESPIRATORY SYSTEM.

Deaths from this class of diseases were 14,210, a decrease of 2,395 as compared with the previous year and a decline in the rate per 100,000 of population from 215.8 to 181.4. Deaths of males numbered 7,777, of females 6,433. Deaths from pneumonia in all forms were 10,962, and of bronchopneumonia, 4,143.

DISEASES OF THE DIGESTIVE SYSTEM.

Deaths from this class of diseases numbered 15,168, a decline of 3,391 as compared with the previous year. Deaths of males were 8,167, of females 7,001. The death rate declined from 241.2 to 193.7.

Diarrhoea and enteritis caused 8,156 deaths of persons under two years of age, a decrease of 2,925 deaths as compared with the previous year and a decline in the rate per 100,000 of population from 144.0 to 104.1.

NON-VENEREAL DISEASES OF THE GENITO-URINARY SYSTEM.

Deaths from diseases of this class numbered 8,292, a decrease of 122 as compared with the previous year. The death rate per 100,000 of population declined from 109.3 to 105.9.

Bright's disease and acute nephritis were responsible for 7,195 deaths in this group. The death rate per 100,000 of population for these causes declined from 94.1 to 91.9.

EXTERNAL CAUSES.

Deaths from this class of causes numbered 9,351. Of this number 7,347 were males and 2,004 females. The death rate for the year was 119.4 as compared with 119.8 for the previous year. A comparison of deaths from certain principal forms of violence for the years 1906-1911, inclusive, is as follows:

	1906	1907	1908	1909	1910	1911
Suicide,	780	892	988	951	975	1,035
Burns and scalds,	847	971	861	824	831	784
Drowning (accidental),	555	566	573	493	496	666
Gunshot wounds (accidental),	149	139	150	121	133	138
Injuries in mines,	983	1,508	1,328	1,218	1,222	1,341
Steam railway injuries,	2,159	2,131	1,457	1,386	1,521	1,385
Homicide,	365	496	385	331	362	317

The death rate per 100,000 of population from suicide increased from 12.7 in 1910 to 13.2. One hundred and forty-two deaths occurred as the result of automobile accidents, 228 as the result of street car accidents, 40 as the result of lightning and 96 in the conflagration of buildings.

MORTALITY TABLE 1.

Deaths by months for all municipalities having over 5,000 population, for groups of municipalities having less than 5,000 population and for the rural sections of each county: (Stillbirths excluded.)

Area.	Aggre- gate.	Jan.	Feb.	Mar.	Apr.	May.	June.	July.	Aug.	Sept.	Oct.	Nov.	Dec.	Un.
Entire State,	111,292	10,269	9,832	10,627	10,028	8,997	7,559	9,853	9,369	8,760	8,581	8,397	9,080	.....
Total for all municipalities having more than 5,000 population,	65,714	5,998	5,746	6,244	5,914	5,383	4,571	6,079	5,268	4,975	5,105	4,935	5,496	.....
Total for all municipalities having less than 5,000 population,	12,842	1,260	1,165	1,231	1,151	1,025	878	1,060	1,163	1,084	934	964	1,047	.....
Total rural,	32,736	3,041	2,981	3,152	2,963	2,589	2,110	2,724	2,388	2,751	2,542	2,408	2,537	.....
Municipalities.														
Allentown,	824	80	57	85	66	61	73	84	62	70	60	51	69	.....
Altoona,	621	52	52	55	63	54	48	58	49	50	32	63	48	.....
Archbald,	68	4	3	7	5	5	5	5	5	13	8	3	5	.....
Arifield,	102	8	8	11	6	12	9	11	5	5	5	14	8	.....
Ashland,	90	5	8	11	17	8	4	3	6	9	5	9	1	.....
Ashley,	69	4	4	3	6	5	6	4	7	11	6	7	4	.....
Banzor,	65	2	6	9	4	4	8	5	6	5	5	3	6	.....
Beaver Falls,	166	18	9	15	23	12	6	13	18	16	13	7	16	.....
Bellevue,	78	5	10	4	6	10	7	6	4	4	5	5	10	.....
Berwick,	8	8	10	6	3	3	3	6	7	4	5	6	1	.....
Bethlehem,	181	19	10	7	17	15	10	17	17	21	15	14	13	.....
Bakely,	54	1	3	6	5	3	5	7	4	13	7	8	4	.....
Bloomsburg,	293	17	27	36	31	28	32	36	32	25	28	21	27	.....
Bradford,	332	26	27	19	20	16	17	14	24	19	12	17	21	.....
Bradford,	292	14	14	19	14	13	13	14	12	13	6	6	13	.....
Brown,	141	18	10	18	9	9	13	20	20	24	22	13	25	.....
Burlington,	241	18	20	19	19	22	19	20	30	29	27	19	15	.....
Carlisle,	294	24	23	23	30	37	16	21	11	15	15	18	12	.....
Carbondale,	171	20	19	15	16	13	11	11	12	15	9	18	12	.....
Carlisle,	92	14	5	5	11	3	5	15	9	9	5	5	6	.....
Carrick,	51	4	6	2	5	5	4	3	6	4	6	1	1	.....
Catasauqua,	58	3	4	6	3	10	7	5	5	5	3	3	2	.....
Chambersburg,	185	22	15	17	22	19	11	12	23	10	16	13	15	.....
Charlton,	111	10	8	10	12	10	8	12	5	9	10	6	10	.....
Chester,	603	64	52	54	67	46	26	61	56	46	38	34	57	.....
Coalfield,	77	4	9	13	7	7	7	5	10	8	2	5	7	.....
Coalville,	113	3	7	12	9	13	7	17	10	13	1	13	7	.....

Cootesville,	127	9	6	15	13	8	7	15	10	10	8	15	11	11	12	6	.....
Columbia,	144	16	16	13	10	13	12	9	8	10	16	16	16	16	16	9	.....
Cornellsville,	189	21	19	10	13	15	20	17	19	11	11	16	16	16	16	13	.....
Cornolocken,	180	12	9	11	10	13	12	14	9	11	16	16	16	16	16	5	.....
Cornopolis,	188	6	9	11	10	10	10	10	8	15	16	16	16	16	16	6	.....
Corry,	103	3	3	11	10	10	10	11	1	10	11	3	3	3	10	13	.....
Danville,	110	8	8	12	12	8	6	1	1	10	11	14	11	11	7	12	.....
Darby,	75	4	13	8	2	6	5	7	7	7	7	7	5	2	2	9	.....
Dickson City,	143	18	12	9	10	13	8	19	13	12	9	8	8	8	12	12	.....
Donora,	107	12	12	11	5	5	8	7	11	11	7	11	7	7	8	10	.....
Du Bois,	133	16	4	5	25	11	7	12	11	14	10	10	6	6	12	12	.....
Dunmore,	319	31	25	32	28	18	19	38	36	17	31	18	31	31	18	26	.....
Duquesne,	181	11	17	17	17	12	21	18	19	18	14	13	10	10	13	10	.....
Duryea,	110	11	12	11	8	6	5	9	8	11	9	10	10	10	10	10	.....
Easton,	486	42	61	58	48	33	33	40	31	37	30	25	25	30	25	43	.....
Edwardsville,	126	8	8	9	6	6	15	14	17	17	8	8	8	8	8	2	.....
East Conemaugh,	44	11	7	5	2	.....	1	7	4	3	3	3	3	3	3	2	.....
East Pittsburg,	144	13	15	11	10	10	10	10	10	10	10	10	10	10	10	10	.....
Etowah,	1,102	143	156	118	92	70	.....	70	69	72	71	4	4	4	82	96	.....
Forest City,	72	7	5	9	4	12	3	10	9	10	6	6	6	6	6	3	.....
Franklin,	99	4	8	6	9	4	6	10	13	7	5	5	5	5	5	6	.....
Freeland,	73	9	4	3	4	7	5	5	7	7	7	7	7	7	6	5	.....
Greensburg,	208	21	12	20	21	19	22	16	19	15	16	16	6	6	6	21	.....
Greenville,	91	6	5	12	12	1	8	5	8	12	8	8	8	8	8	6	.....
Gilberton,	94	8	4	10	7	5	8	12	9	8	9	9	9	9	7	7	.....
Glassport,	51	6	5	3	4	5	4	5	4	3	3	3	3	3	6	4	.....
Hanover,	86	7	8	9	7	6	10	4	7	5	5	5	5	5	9	9	.....
Harrisburg,	990	97	92	110	74	89	122	81	72	73	63	79	79	79	88	.....
Hazleton,	337	27	35	22	32	26	23	22	35	34	20	21	21	21	27	.....
Houmsted,	138	15	17	12	12	14	16	20	20	22	16	23	23	23	18	.....
Huntingdon,	91	16	17	17	8	10	9	8	7	7	4	4	4	4	5	4	.....
Indiana,	76	10	7	7	8	10	9	9	8	4	5	5	5	5	3	.....
Jeanette,	78	6	6	6	6	6	10	9	9	4	5	5	5	5	3	.....
Jersey Shore,	5	5	3	5	9	5	3	4	8	8	4	4	4	4	5	.....
Johnstown,	830	63	84	62	66	59	60	81	76	80	75	51	51	51	73	.....
Jullata,	46	10	3	15	8	6	2	3	6	4	5	2	2	2	2	.....
Kane,	96	6	11	15	7	4	8	8	4	4	10	9	9	9	14	.....
Kingston,	84	3	8	7	7	5	7	2	15	8	8	5	5	5	5	.....
Knoxville,	48	5	4	7	7	6	5	6	2	2	3	3	3	3	6	.....
Lancaster,	66	66	54	77	61	64	52	54	55	47	62	50	50	50	52	.....
Lansford,	110	7	7	7	15	9	8	10	18	13	7	3	3	3	16	.....
Larksville,	138	7	9	6	11	23	13	12	14	10	9	12	12	12	12	.....
Larabee,	307	25	24	30	35	22	19	24	25	25	20	20	20	20	22	.....
Lebanon,	54	25	24	30	35	22	19	24	25	25	20	20	20	20	22	.....
Lewistown,	97	7	13	6	11	11	6	7	5	8	8	6	6	6	9	.....
Leighton,	94	7	13	6	11	11	6	7	5	8	8	6	6	6	9	.....
Lock Haven,	134	14	14	9	16	14	6	12	10	6	8	6	6	6	13	.....
Luzerne,	83	6	7	9	9	14	5	13	16	4	4	4	4	4	4	.....
McKeesport,	634	44	67	70	57	51	42	56	53	44	65	44	44	44	41	.....
McKees Rocks,	165	19	10	12	8	8	9	21	19	17	13	12	12	12	10	.....
Mahanoy City,	273	19	17	15	23	29	28	44	24	24	18	21	21	21	16	.....
Meadville,	174	20	20	16	15	11	14	8	15	9	18	16	16	16	12	.....
Middletown,	77	6	7	5	5	11	11	6	8	8	7	7	7	7	4	.....
Monessen,	139	15	9	5	11	9	10	11	23	10	14	15	15	15	7	.....

TABLE 1.—Continued.

Area.	Aggre- gate.	Jan.	Feb.	Mar.	Apr.	May.	June.	July.	Aug.	Sept.	Oct.	Nov.	Dec.	Un.
Millvale,	89	7	10	9	3	7	6	11	7	9	5	5	10	.....
Milton,	89	10	6	8	4	11	4	6	6	9	11	8	6	.....
Monaca,	114	12	9	6	7	6	5	17	15	14	8	7	8	.....
Monongahela,	103	11	5	12	7	10	9	17	6	9	8	9	8	.....
Mount Carmel,	191	14	12	13	17	19	12	25	15	20	19	12	13	.....
Mount Pleasant,	86	7	6	9	3	4	6	8	7	9	11	3	8	.....
Munhall,	57	7	3	4	3	7	4	3	4	2	7	10	3	.....
Nanticoke,	286	25	16	27	27	24	26	26	22	32	27	17	17	.....
New Brighton,	140	9	13	6	17	14	11	12	17	11	8	7	15	.....
New Castle,	534	54	47	50	49	41	58	39	45	48	45	35	52	.....
New Kensington,	141	12	12	11	10	14	11	11	6	11	11	6	11	.....
New River,	624	58	54	71	59	57	87	84	41	51	56	28	52	.....
North Bedford,	142	17	11	8	12	10	9	14	11	12	13	16	17	.....
Northampton,	156	17	19	17	14	9	10	17	20	14	10	17	11	.....
Oil City,	213	15	25	20	17	19	15	11	27	18	15	15	13	.....
Old Forge,	167	12	16	14	16	16	15	17	15	15	15	9	9	.....
Olyphant,	125	10	13	13	13	8	10	13	15	15	14	14	8	.....
Philadelphia,	26,276	2,354	2,315	2,666	2,442	2,182	1,817	2,424	1,938	1,820	2,037	2,013	2,268	.....
Phoenixville,	192	24	12	16	16	15	14	22	18	13	13	16	13	.....
Pittsburgh,	8,099	821	717	766	679	659	539	761	630	574	637	650	676	.....
Pittston,	289	22	28	20	21	16	17	31	29	22	21	24	23	.....
Plymouth,	252	31	21	19	16	18	17	34	26	23	15	19	13	.....
Pottsville,	337	33	26	44	33	35	34	43	42	20	34	21	22	.....
Pottstown,	141	18	20	23	14	19	20	13	10	17	19	11	22	.....
Punkatawney,	111	10	18	4	15	9	7	17	9	17	16	8	17	.....
Reading,	110	10	18	4	15	9	7	17	12	10	17	8	17	.....
Rochester,	1,408	138	142	156	111	119	101	158	97	104	108	108	102	.....
Ridgely,	129	15	12	9	7	12	12	11	7	10	12	12	17	.....
Ridgway,	74	7	7	6	4	8	6	3	6	12	5	5	9	.....
St. Clair, (Allegheny Co.,)	55	4	2	7	4	5	6	3	6	2	4	7	8	.....
St. Marys,	67	4	8	4	5	6	4	7	5	9	4	9	2	.....
Sayre,	163	13	18	15	13	13	10	10	18	11	8	8	16	.....
Scranton,	1,974	161	150	163	137	154	131	228	150	170	151	164	162	.....
Scottsdale,	44	2	4	4	3	4	2	5	4	6	5	.....	4	.....
St. Clair, (Schuylkill Co.,)	82	7	4	8	8	11	2	3	12	5	10	6	16	.....
Shamokin,	190	20	15	20	20	29	16	29	21	25	17	15	16	.....
Sharon,	251	17	23	15	15	11	13	21	22	24	15	15	40	.....
Sharpsburg,	188	10	16	10	13	8	12	5	9	3	7	7	42	.....
Shenandoah,	506	49	27	40	33	43	42	47	23	23	51	43	21	.....
South Bethlehem,	398	25	23	26	23	18	13	37	25	28	27	27	21	.....
Steelton,	183	20	13	17	8	11	10	16	21	19	13	19	14	.....
Sunbury,	131	12	16	12	13	14	17	15	19	10	13	13	27	.....

	67	2	5	8	6	8	30	8	5	8	1	4	2
Swissvale,	106	11	5	7	12	8	4	12	15	1	7	11	13
Swoyersville,	112	12	13	11	12	5	11	10	13	10	8	6	5
South Sharon,	146	13	15	10	8	31	11	13	12	10	2	13	6
Tamaqua,	162	14	11	15	15	7	4	17	16	13	18	20	9
Tarentum,	182	17	11	11	17	12	12	16	17	11	11	11	11
Taylor,	197	3	13	11	18	17	5	17	19	7	7	13	8
Tioga,	120	14	13	10	4	10	12	8	7	13	5	9	9
Titusville,	77	7	10	5	6	10	15	4	6	3	5	17	8
Tyrone,	217	25	14	21	13	14	13	22	20	16	22	14	23
Uniontown,	105	15	12	12	6	6	7	5	11	11	7	7	18
Warren,	260	21	29	29	21	20	23	23	20	17	22	16	19
Washington,	92	9	7	9	8	5	7	7	4	6	3	1	3
Waynesboro,	49	4	6	4	4	5	3	3	10	3	3	1	3
West Berwick,	237	19	20	25	31	9	25	14	19	17	25	14	19
West Chester,	92	8	13	9	9	11	7	5	6	5	4	8	7
West Pittston,	1,072	88	78	101	90	74	67	130	104	81	89	75	98
Wilkes-Barre,	252	20	28	23	20	24	12	18	23	17	23	25	18
Williamsport,	59	51	48	48	60	47	38	29	38	28	35	41	46
Williamstown,	152	14	14	14	14	6	6	15	16	12	7	4	2
Winthrop,	127	16	3	15	10	3	7	13	12	15	9	4	9
Wintona,	114	2	14	10	14	9	7	15	12	15	9	4	9
York,	659	63	46	60	58	55	46	48	55	54	64	46	61
Counties.													
Adams,	297	21	37	34	29	14	19	19	27	30	19	21	27
Allegheny,	2,584	236	192	214	242	218	186	287	255	205	174	191	184
Armstrong,	475	53	51	43	39	44	26	32	44	41	26	31	45
Beaver,	550	20	21	22	18	24	15	15	27	18	22	24	24
Bedford,	322	33	31	23	31	25	22	22	25	32	34	17	24
Berks,	409	27	30	36	36	26	23	50	39	42	39	30	35
Bradford,	385	33	63	52	41	38	40	41	33	31	43	40	40
Bucks,	922	114	64	58	52	48	63	68	52	72	69	53	74
Butler,	635	52	55	49	38	39	31	37	58	32	32	34	46
Cameron,	755	63	52	52	70	57	46	54	94	70	70	54	50
Carlisle,	53	4	8	6	3	2	4	7	3	3	6	3	3
Carbon,	330	30	20	29	27	23	27	28	35	32	32	34	31
Centre,	348	41	31	42	33	35	25	19	31	19	16	25	24
Chester,	903	75	72	101	77	69	55	81	90	92	67	56	68
Charlton,	274	39	39	27	20	24	8	17	14	20	18	26	22
Clearfield,	603	52	55	62	52	41	40	42	61	41	50	51	56
Clinton,	161	16	20	11	9	24	8	10	11	7	9	19	17
Columbia,	285	28	36	26	23	25	26	27	27	23	18	20	22
Crawford,	390	43	46	39	39	35	29	29	21	23	18	29	22
Cumberland,	277	29	32	35	32	32	15	16	16	26	24	29	27
Dauphin,	570	44	53	41	39	40	41	47	45	45	39	39	45
Delaware,	532	50	53	48	45	43	9	47	28	18	34	32	34
Elk,	27	27	25	29	30	30	9	9	22	22	31	31	45
Franklin,	405	43	44	35	35	30	98	137	183	170	100	100	198
Greene,	1,607	159	121	150	143	118	98	137	183	170	100	100	198
Lycoming,	405	43	44	35	35	30	9	9	22	22	31	31	45
Monroe,	405	43	44	35	35	30	9	9	22	22	31	31	45
Montgomery,	405	43	44	35	35	30	9	9	22	22	31	31	45
Northampton,	405	43	44	35	35	30	9	9	22	22	31	31	45
Northumberland,	405	43	44	35	35	30	9	9	22	22	31	31	45
Perry,	405	43	44	35	35	30	9	9	22	22	31	31	45
Richmond,	405	43	44	35	35	30	9	9	22	22	31	31	45
Schuyler,	405	43	44	35	35	30	9	9	22	22	31	31	45
Seneca,	405	43	44	35	35	30	9	9	22	22	31	31	45
Sherburne,	405	43	44	35	35	30	9	9	22	22	31	31	45
Snyder,	405	43	44	35	35	30	9	9	22	22	31	31	45
Tioga,	405	43	44	35	35	30	9	9	22	22	31	31	45
Township,	405	43	44	35	35	30	9	9	22	22	31	31	45
Union,	405	43	44	35	35	30	9	9	22	22	31	31	45
Warren,	405	43	44	35	35	30	9	9	22	22	31	31	45
Washington,	405	43	44	35	35	30	9	9	22	22	31	31	45
Waynes,	405	43	44	35	35	30	9	9	22	22	31	31	45
West Chester,	405	43	44	35	35	30	9	9	22	22	31	31	45
West Pittston,	405	43	44	35	35	30	9	9	22	22	31	31	45
Wilkes-Barre,	405	43	44	35	35	30	9	9	22	22	31	31	45
Williamsport,	405	43	44	35	35	30	9	9	22	22	31	31	45
Williamstown,	405	43	44	35	35	30	9	9	22	22	31	31	45
Winthrop,	405	43	44	35	35	30	9	9	22	22	31	31	45
Wintona,	405	43	44	35	35	30	9	9	22	22	31	31	45
York,	405	43	44	35	35	30	9	9	22	22	31	31	45

TABLE 1.—Continued.

Area.	Aggre- gate.	Jan.	Feb.	Mar.	Apr.	May.	June.	July.	Aug.	Sept.	Oct.	Nov.	Dec.	Un.
Greene,	921	18	30	27	25	12	7	19	23	10	14	20	16	.....
Huntingdon,	282	35	46	35	31	31	12	14	14	25	17	20	14	.....
Indiana,	681	55	66	71	68	36	43	53	74	66	66	33	33	.....
Jefferson,	428	39	47	33	44	38	28	27	36	41	30	40	25	.....
Lancaster,	157	19	13	13	19	12	8	7	10	16	16	12	18	.....
Lackawanna,	345	31	27	29	29	30	19	46	25	27	30	21	31	.....
Lancaster,	1,070	108	100	106	117	77	67	69	85	80	102	79	80	.....
Lawrence,	289	28	25	26	27	15	16	29	29	30	19	23	22	.....
Lebanon,	496	42	58	36	54	30	37	44	43	49	30	40	33	.....
Lehigh,	604	55	61	60	65	54	36	41	48	41	45	57	41	.....
Luzerne,	1,331	117	110	106	120	107	89	122	125	116	110	114	95	.....
Lycoming,	337	35	28	35	34	28	18	25	28	29	21	26	30	.....
McKean,	192	15	13	21	13	17	9	19	13	27	16	11	18	.....
Merret,	374	39	43	35	40	38	27	19	25	23	23	23	18	.....
Mifflin,	245	19	21	34	24	19	14	13	13	14	10	19	15	.....
Monroe,	1,184	105	98	105	105	72	81	96	102	93	75	85	80	.....
Montgomery,	179	25	14	16	13	11	9	22	12	16	16	9	16	.....
Northampton,	539	46	56	52	44	41	39	55	39	51	37	30	49	.....
Northumberland,	536	39	55	50	45	53	34	36	47	38	52	37	50	.....
Perry,	210	20	18	21	22	17	17	16	19	13	18	13	16	.....
Pike,	75	7	7	6	7	5	8	5	4	4	4	4	11	.....
Potter,	188	19	21	24	10	20	13	15	15	14	15	10	12	.....
Schuylkill,	1,087	95	87	115	87	79	77	87	125	107	86	69	73	.....
Snyder,	192	12	12	13	17	17	17	20	18	10	21	14	25	.....
Somerset,	543	43	43	38	51	38	36	48	59	52	48	41	40	.....
Sullivan,	119	14	9	16	14	16	5	7	16	18	10	9	18	.....
Susquehanna,	313	30	31	36	33	25	20	33	33	35	35	23	37	.....
Toga,	331	25	32	31	31	26	23	29	30	25	25	23	30	.....
Tioga,	183	13	13	11	11	11	11	11	11	11	11	11	12	.....
Union,	247	20	23	31	26	10	13	11	22	26	26	13	24	.....
Vanango,	359	32	42	27	30	30	20	35	27	37	17	29	34	.....
Washington,	1,058	101	97	103	77	87	66	99	96	89	98	72	73	.....
Wayne,	234	34	24	37	25	29	9	53	21	26	22	19	15	.....
Westmoreland,	1,600	134	145	157	129	125	92	141	185	143	113	108	123	.....
Wyoming,	139	10	12	10	16	15	13	10	8	13	8	11	14	.....
York,	680	75	62	64	54	54	42	54	53	63	44	65	50	.....

MORTALITY TABLE 2.

Deaths in the entire State, from each cause and class of causes, by sex and age. (Stillbirths excluded.)

Cause of Death.		Age.													
Inter- vention.		All ages.	Un- der 1.	1.	2.	3.	4.	Total Un- der 5.	5 to 9.	10 to 14.	15 to 19.	20 to 24.	25 to 29.	30 to 34.	35 to 39.
	All causes,	111,292	24,195	5,098	2,077	1,423	995	33,788	2,630	1,553	2,629	4,024	4,177	4,154	4,812
	Males,	60,588	13,695	2,690	1,091	752	518	18,676	1,340	835	1,461	2,170	2,314	2,358	2,850
	Females,	50,704	10,501	2,408	986	671	477	15,112	1,290	718	1,168	1,854	1,863	1,796	1,962
	1.—GENERAL DISEASES,	27,495	2,008	1,315	856	683	628	5,390	1,303	629	1,192	1,817	1,818	1,670	1,790
	Males,	13,778	1,076	691	437	379	264	2,847	639	286	577	910	911	887	974
	Females,	13,717	1,932	624	419	304	364	2,543	664	343	615	907	907	783	816
1	Typhoid fever,	1,043	2	7	6	9	12	36	40	42	123	180	162	119	104
	{ M.,	673	2	7	3	6	12	30	52	58	92	103	81	55	53
2	Typhus fever,														
	{ M.,														
	{ F.,														
3	Relapsing fever,														
	{ M.,														
	{ F.,														
4	Malaria,	21	2		1		1	4	1		1	1	1	2	1
	{ M.,	16	1					2	1		1		2		
	{ F.,														
5	Smallpox,	4	1	1		1	1	4							
	{ M.,	1	1					1							
	{ F.,														
6	Measles,	411	119	125	59	38	19	360	29	8	4	5	2	1	2
	{ M.,	393	83	148	58	33	22	344	25	7	6	2	1	3	3
	{ F.,														
7	Scarlet fever,	384	20	59	53	73	39	241	87	21	13	6	5	4	4
	{ M.,	365	26	44	60	40	46	216	82	24	13	11	11	3	3
	{ F.,														
8	Whooping cough,	468	276	121	30	16	8	451	15	1					
	{ M.,	530	291	133	45	26	9	509	19						
	{ F.,														
9	Diphtheria and croup,	1,116	69	194	191	173	122	749	277	47	13	8	8	1	5
	{ M.,	995	53	131	169	128	116	597	281	59	23	11	5	5	4
	{ F.,														
10	Influenza,	530	61	14	4	1	2	82	3	5	10	4	12	10	8
	{ M.,	619	35	9	6	2	4	56	10	6	3	6	16	5	10
	{ F.,														

TABLE 2.—Continued.

International Number.	Cause of Death.	Age.													
		All ages.	Un- der 1.	1.	2.	3.	4.	Total Un- der 5.	5 to 9.	10 to 14.	15 to 19.	20 to 24.	25 to 29.	30 to 34.	35 to 39.
11	Miliary fever, {M., F.,	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
12	Asiatic cholera, {M., F.,	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
13	Cholera nostras, {M., F.,	37 31	7 6	2 3	1 .....	.....	.....	10 9	1	1 .....	.....	2	1 .....	.....	1
14	Dysentery, {M., F.,	150 129	37 31	23 12	6 4	6	2 2	74 55	1 .....	.....	1	1 .....	.....	3	2 1
15	Plague, {M., F.,	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
16	Yellow fever, {M., F.,	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
17	Leprosy, {M., F.,	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
18	Erysipelas, {M., F.,	149 138	49 60	6 4	..... 2	..... 1	.....	55 67	1 1	3 3	1	5 2	1	3 4	7 1
19	Other epidemic diseases, {M., F.,	19 12	10 2	3 3	..... 1	.....	.....	13 7	2 2	.....	1	1 .....	.....	1.....	.....
20	Purulent infection and septi- chemia, {M., F.,	131 92	20 17	4 7	3 1	2 1	2	31 26	8 7	5 3	6 4	5	3 4	6 1	9 6
21	Glanders, {M., F.,	1 .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	1.....	.....
22	Anthrax, {M., F.,	2 .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	2
23	Rabies, {M., F.,	7 3	.....	.....	1 .....	.....	1	1 1	3	1	1 .....	.....	.....	1.....	.....
24	Tetanus, {M., F.,	99 38	10 16	.....	.....	2 1	6 3	18 21	16 5	10 3	11	7	1	5 1	6 3

TABLE 2. —Continued.

International Number.	Cause of Death.	Age.													
		All ages.	Un- der 1.	1.	2.	3.	4.	Total Un- der 5.	5 to 9.	10 to 14.	15 to 19.	20 to 24.	25 to 29.	30 to 34.	35 to 39.
41	Of the peritonæum, intes- tines, rectum, {M., {F.,	389 469	1	1	1	1	.....	4	1	1	1	4	7	13	16
42	Of the female genital organs, F.,	833	.....	.....	.....	.....	.....	2	.....	.....	.....	4	7	8	27
43	Of the breast, {M., {F.,	5 475	.....	.....	.....	.....	.....	.....	1	.....	1	6	10	33	54
44	Of the skin, {M., {F.,	100 81	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	27
45	Of other organs or of organs not specified, {M., {F.,	445 275	1	1	.....	4	2	8	5	1	7	7	7	14	22
46	Other tumors (tumors of the female genital organs ex- cepted), {M., {F.,	10 26	1	.....	.....	.....	.....	1	.....	.....	.....	.....	.....	.....	.....
47	Acute articular rheumatism, .. {M., {F.,	235 228	5 1	1 2	3 1	3 3	5 2	17 9	34 33	32 25	13 15	16 8	7 8	11 10	11 12
48	Chronic rheumatism and gout, . {M., {F.,	40 66	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
49	Scurvy, {M., {F.,	5 8	2 5	.....	1	1	.....	5 6	.....	.....	.....	.....	.....	.....	.....
50	Diabetes, {M., {F.,	441 595	1	1	8 1	2 1	.....	12 4	7 6	15 18	12 15	19 12	16 12	10 17	24 22
51	Exophthalmic goiter, {M., {F.,	10 57	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
52	Addison's disease, {M., {F.,	9 16	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
53	Leucæmia, {M., {F.,	62 40	3 1	3	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
54	Anæmia, chlorosis, {M., {F.,	139 189	21 9	7 1	4 1	1 1	.....	36 12	3 5	4 3	2 8	2 9	5 9	3 8	10 7

55	Other general diseases,	{M., F.,	68 69	29 30	1 1	1 5	2 2	2	35 38	4 4	1 2	6	3 1	2 2	..... 3	3 4
56	Alcoholism (acute or chronic),	{M., F.,	255 22	.....	.....	.....	.....	.....	.....	.....	.....	1	7	15 3	30 4	41
57	Chronic lead poisoning,	{M., F.,	19 .....	.....	.....	.....	.....	.....	.....	.....	.....	1	1 .....	.....	.....	3
58	Other chronic occupation poison- ings,	{M., F.,	1 .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	1
59	Other chronic poisonings,	{M., F.,	9 11	.....	.....	.....	.....	.....	.....	.....	.....	1	1 .....	.....	.....	1
II. DISEASES OF THE NERVOUS SYSTEM AND OF THE ORGANS OF SPECIAL SENSE,																
			11,064	1,357	283	132	86	49	1,901	136	79	102	140	123	181	282
Males,			5,893	806	156	69	52	24	1,107	68	39	57	68	69	101	175
Females,			5,171	551	127	63	28	25	794	68	40	45	72	54	80	107
60	Encephalitis,	{M., F.,	72 43	12 9	4 5	3 2	3 2	2	22 50	10 2	2 2	4 3	2	5	2 1	2 1
61	Meningitis,	{M., F.,	384 323	139 110	62 45	34 30	27 15	8 11	270 211	19 30	13 12	14 10	7 10	13 6	5 5	6 9
Simple meningitis,			311 265	119 94	49 36	27 24	20 13	8 7	223 174	13 50	7 10	7 8	7 8	11 5	5 5	7
Cerebrospinal meningitis, (un- defined),			59 50	17 15	13 8	5 5	5 2	.....	40 23	5 7	5 2	4 1	.....	2 1	.....	.....
Cerebrospinal fever,			14 8	3 1	.....	2 1	2	1	7 4	1 3	1 .....	.....	.....	.....	.....	1
62	Locomotor ataxia,	{M., F.,	153 37	.....	.....	.....	.....	.....	.....	.....	.....	.....	1.....	.....	.....	.....
63	Other diseases of the spinal cord,	{M., F.,	225 193	9 11	11 13	6 4	6 3	.....	28 36	6 10	4 6	4 2	7 4	2 5	5 5	8 9
Acute anterior poliomyelitis, ..			45 48	6 9	10 12	5 4	4 3	4	29 32	4 5	1 4	3 1	3 2	.....	1	1
*Other diseases of the spinal cord,			190 145	3 2	1	1	2	2	9 4	2 2	3 2	1 1	6 2	2 5	4 6	7 9
64	Cerebral hæmorrhage, apoplexy, ..	{M., F.,	3,095 3,013	45 24	9 8	3 3	1 2	3	61 37	7 6	3 1	7 3	14 7	13 6	28 31	52 36

* Exclusive of acute anterior poliomyelitis, (infantile paralysis.)

TABLE 2.—Continued.

International Number.	Cause of Death.	Age.													
		All ages.	Un-der 1.	1.	2.	3.	4.	Total Un-der 5.	5 to 9.	10 to 14.	15 to 19.	20 to 24.	25 to 29.	30 to 34.	35 to 39.
65	Softening of the brain, {M., 														

77	Pericarditis,	{M., {F.,	51 41	1	.....	1	.....	2	.....	1	4	2	2	3	3	.....	3	.....	3	1
78	Acute endocarditis,	{M., {F.,	272 215	19 9	.....	1	.....	3	.....	5	25 20	14 13	6 11	17 14	11 15	15 11	19 11	25 20	.....	.....
79	Organic diseases of the heart,	{M., {F.,	5,314 4,789	105 78	6 11	8 6	128 114	53 72	73 85	91 88	73 102	107 97	146 106	189 130	.....	.....	.....	.....	.....	.....
80	Angina pectoris,	{M., {F.,	338 217	1	.....	1	.....	1	.....	.....	2	.....	.....	3	3	5	3	13	3	13
81	Diseases of the arteries,	{M., {F.,	774 624	1	.....	1	.....	1	.....	.....	1	.....	.....	.....	2	2	12	12	12	12
82	Embolism and thromboses,	{M., {F.,	109 122	4	.....	1	.....	.....	.....	.....	4	.....	2	2	2	2	6	6	6	6
83	Diseases of the veins, (varicose, hemorrhoids, phlebitis, etc.),	{M., {F.,	18 27	1	.....	.....	.....	.....	.....	.....	1	.....	.....	.....	1	.....	1	.....	.....	3
84	Diseases of the lymphatic sys- tem (lymphangitis, etc.),	{M., {F.,	29 11	9 8	1 1	.....	.....	1	.....	.....	13	1	1	1	.....	1	.....	.....	.....	1
85	Hemorrhage; other diseases of (M., the circulatory system,	{M., {F.,	15 29	6 14	.....	.....	.....	.....	.....	.....	6	.....	.....	.....	1	.....	.....	.....	.....	.....
IV.—DISEASES OF THE RESPI- RATORY SYSTEM,																				
Males,																				
Females,																				
86	Diseases of the nasal fossae, ..	{M., {F.,	15 15	5 6	.....	1	.....	.....	.....	.....	6	3	3	.....	.....	.....	.....	.....	.....	.....
87	Diseases of the larynx,	{M., {F.,	95 74	19 20	17 9	5 2	67 50	11 7	3 3	1	.....	.....	.....	.....	1	1	.....	.....	.....	437
88	Diseases of the thyroid body, ..	{M., {F.,	5 30	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	288
89	Acute bronchitis,	{M., {F.,	561 493	358 246	72 83	17 19	467 360	7 11	3	1	.....	.....	.....	.....	2	2	.....	.....	.....	149
90	Chronic bronchitis,	{M., {F.,	236 517	12 12	1 2	.....	.....	.....	.....	.....	13	6	2	2	2	4	.....	.....	.....	.....
91	Bronchopneumonia,	{M., {F.,	2,136 2,007	990 774	335 335	119 51	1,552 1,303	55 49	13 13	13 13	19 17	15 16	29 12	16 29	.....	.....	.....	.....	.....	.....
92	Pneumonia,	{M., {F.,	3,896 2,929	751 524	282 223	93 102	1,224 1,131	68 81	35 42	76 56	135 75	150 69	157 91	223 96	.....	.....	.....	.....	.....	.....

TABLE 2. —Continued.

Cause of Death.		Age.													
International Number.		All ages.	Un- der 1.	1.	2.	3.	4.	Total Un- der 5.	5 to 9.	10 to 14.	15 to 19.	20 to 24.	25 to 29.	30 to 34.	35 to 39.
	Lobar pneumonia, {M., F.,	1,948 1,298	184 130	103 75	38 38	16 22	14 10	355 275	30 34	19 18	44 31	83 45	99 43	106 52	146 62
	Pneumonia (undefined), {M., F.,	1,942 1,631	567 394	179 148	55 64	51 31	17 19	869 656	38 47	16 24	32 25	43 30	51 26	51 39	74 31
93	Pleurisy, {M., F.,	179 155	16 5	4 3	10 6	4 6	2 1	36 21	5 7	3 4	6 7	8 6	10 5	10 12	14 8
94	Pulmonary congestion, pulmon- ary atoplexy, {M., F.,	231 237	67 63	7 5	6 1	.....	2 1	82 74	8	1 3	1	2 3	6 1	6 5	7 6
95	Gangrene of the lung, {M., F.,	16 6	1 .....	.....	.....	.....	1	1 .....	.....	.....	.....	1	1.....	.....	.....
96	Asthma, {M., F.,	178 100	2 .....	.....	2	1 2	.....	5 3	.....	.....	.....	.....	1 1	7 3	6 1
97	Pulmonary emphysema, {M., F.,	13 6	1 1	.....	.....	.....	.....	1 .....	.....	.....	1 .....	.....	.....	.....	3
98	Other diseases of the respiratory (M., system (tuberculosis excepted) {F.,	162 64	10 8	2 .....	.....	.....	.....	12 8	.....	.....	1 4	5 3	3 2	9 4	9 3
	V.—DISEASES OF THE DIGES- TIVE SYSTEM, {M., F.,	15,168	7,612	1,567	278	133	95	9,685	205	135	159	218	218	232	325
	Males, {M., F.,	8,167 7,001	4,226 3,386	818 749	144 134	67 66	49 46	5,304 4,381	101 104	83 52	96 63	107 111	108 110	119 113	189 136
99	Diseases of the mouth and an- nexa, {M., F.,	29 28	22 15	1 2	.....	.....	1	24 18	1 1	.....	.....	.....	1	.....	.....
100	Diseases of the pharynx, {M., F.,	69 49	15 5	7 3	5	4 9	4 3	35 20	6 6	2 4	3	3 .....	.....	1 2	3 1
101	Diseases of the œsophagus, {M., F.,	13 7	1 .....	.....	1 1	.....	.....	2 2	.....	.....	.....	1	1	.....	.....

102	Ulcer of the stomach, {M., F.,	134, 102	1 4	.....	.....	.....	1	.....	1 5	.....	.....	1 3	3 8	11 6	7 12	10 8
103	Other diseases of the stomach (M., (cancer excepted), {F.,	828, 787	318 247	40 25	12 16	7 4	.....	6 7	383 299	16 16	11 7	.....	.....	.....	.....	.....
104	Diarrhoea and enteritis (under {M., 2 years), {F.,	4,453 3,763	3,766 3,094	747 689	.....	.....	.....	.....	4,453 3,763	.....	.....	.....	.....	.....	.....	.....
105	Diarrhoea and enteritis (2 years {M., and over, {F.,	525 580	.....	.....	105 99	29 41	.....	26 25	170 165	32 26	4 7	.....	11 12	13 4	7 6	17 12
106	Ankylostomiasis, {M., F.,	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
107	Intestinal parasites, {M., F.,	2 9	.....	.....	2 4	.....	.....	.....	2 8	.....	.....	1.....	.....	.....	.....	.....
108	Appendicitis and typhlitis, {M., F.,	429 255	3 1	2 2	3 1	7 2	.....	3 5	18 11	27 32	49 22	60 24	44 31	34 27	31 9	53 18
109	Hernia, intestinal obstruction, {M., F.,	427 428	84 50	12 7	7 5	3 2	.....	3 1	109 65	5 3	6 3	5 7	20 15	11 15	16 19	23 17
	Hernia, {M., F.,	156 125	24 6	3 1	2 .....	.....	.....	1	30 7	.....	.....	1	9 2	2 3	6 4	7 5
	Intestinal obstruction, {M., F.,	271 363	60 44	9 6	5 5	3 2	.....	2 1	79 38	5 3	5 3	4 1	11 13	9 12	10 15	16 12
110	Other diseases of the intestines, {M., F.,	97 119	23 29	3 3	2 1	1 .....	.....	2	41 23	2 3	1	1	2 4	3 10	1 5	1 7
111	Acute yellow atrophy of the {M., liver, {F.,	16 28	2 2	.....	.....	.....	.....	.....	2 2	.....	.....	.....	.....	.....	.....	.....
112	Hydatid tumor of the liver, {M., F.,	.....	.....	.....	.....	.....	.....	1.....	.....	.....	.....	.....	.....	.....	.....	.....
113	Cirrhosis of the liver, {M., F.,	729 341	1 3	2 .....	.....	1 .....	.....	1	5 5	1 6	1	3	5 1	7 5	39 9	50 17
114	Biliary calculi, {M., F.,	50 158	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	1	1	3 11
115	Other diseases of the liver, {M., F.,	179 223	18 12	4 2	1 1	2 1	.....	1	26 16	2 2	1 3	1 4	5 5	2 5	6 9	7 11
116	Diseases of the spleen, {M., F.,	6 8	.....	.....	1 .....	.....	.....	.....	1 .....	.....	.....	.....	1 .....	.....	1.....	.....
117	Simple peritonitis (non-puer- {M., perat), {F.,	130 146	22 9	.....	4 3	2 6	.....	2 3	30 26	6 6	1 5	11 8	5 16	8 17	6 15	4 12

TABLE 2.—Continued.

International Number.		Cause of Death.	Age.													
			All ages.	Under 1.	1.	2.	3.	4.	Total Under 5.	5 to 9.	10 to 14.	15 to 19.	20 to 24.	25 to 29.	30 to 34.	35 to 39.
IX.—DISEASES OF THE BONES AND OF THE ORGANS OF LOCOMOTION.																
		Males.	176	19	7	8	3	3	40	22	16	13	10	12	7	9
		Females.	113	12	5	5	2	2	26	11	10	11	6	8	5	8
146		Diseases of the bones (tuberculosis excepted).	63	7	2	3	1	1	14	11	6	2	4	4	2	1
		{ M.	102	11	5	5	2	2	25	11	10	10	5	7	3	8
		{ F.	53	7	2	3	1	1	14	10	6	2	3	3	2	1
147		Diseases of the joints (tuberculosis excepted).	8	1					1	1		1	1	1		
		{ M.	8													
		{ F.														
148		Amputations.														
		{ M.														
		{ F.														
149		Other diseases of the organs of locomotion.	3												2	
		{ M.														
		{ F.														
X.—MALFORMATIONS.			1,345	1,261	37	11	3	7	1,319	12	8	2	2	2		
		Males.	738	693	16	6	2	4	721	5	7	2	1	2		
		Females.	607	568	21	5	1	3	598	7	1					
150		Congenital malformations (still-births not included).	738	693	16	6	2	4	721	5	7	2	1	2		
		{ M.	697	568	21	5	1	3	598	7	1					
		{ F.														
		Hydrocephalus.	56	39	7	2	1	3	52	1	3					
		{ M.	55	45	7	1		2	55							
		{ F.														
		Congenital malformations of the heart.	495	473	7	2	1	1	484	4	3	2	1	1		
		{ M.	386	369	12	4	1	1	378	6	1					
		{ F.														
		Other congenital malformations.	137	131	2	2			135		1			1		
		{ M.	166	163	2				165	1						
		{ F.														
XI.—EARLY INFANCY.			6,946	6,946					6,946							
		Males.	3,943	3,943					3,943							
		Females.	3,003	3,003					3,003							

TABLE 2. —Continued.

Cause of Death.		Age.													
International Number.		All ages.	Under 1.	1.	2.	3.	4.	Total Under 5.	5 to 9.	10 to 14.	15 to 19.	20 to 24.	25 to 29.	30 to 34.	35 to 39.
160	Suicide by cutting or piercing (M., instruments, {F.,	59	.....	.....	.....	.....	.....	.....	.....	.....	1	3	9	3	11
161	Suicide by jumping from high places, {F.,	12	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	1	.....	1
162	Suicide by crushing, {M., {F.,	6	.....	.....	.....	.....	.....	.....	.....	.....	1	.....	1	2	1
163	Other suicides, {M., {F.,	6	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	1	3	.....
	Accidental or undefined (total), {M., {F.,	6,286 1,685	156 134	148 103	108 94	77 94	66 47	555 472	226 127	233 56	413 54	658 65	676 48	583 53	625 34
164	Poisoning by food, {M., {F.,	16 18	2 6	..... 4	.....	1 1	.....	3 11	1 1	1 .....	.....	3	2 .....	.....	1
165	Other acute poisonings, {M., {F.,	85 77	12 5	21 16	12 8	1 6	5 7	51 42	6 2	1 1	1 4	6 2	3 4	3 5	3 4
166	Conflagration, {M., {F.,	59 37	3 3	3 3	2 2	2 2	3 1	11 11	8 6	7 3	.....	3 1	2 .....	.....	5 3
167	Burns (conflagration excepted), {M., {F.,	356 423	24 11	65 40	58 65	46 65	24 30	217 211	21 54	6 14	7 11	13 16	12 17	23 10	12 4
168	Absorption of deleterious gases (M., (conflagration excepted), {F.,	153	29	2	1	.....	.....	32	4	6	3	10	6	9	15
169	Accidental drowning, {M., {F.,	559 107	5 4	15 13	6 3	5 3	9 2	40 25	47 7	62 6	81 8	73 14	56 8	26 7	44 3
170	Traumatism by firearms, {M., {F.,	120 18	.....	.....	2 2	2	4	8 2	14 1	23 4	18 7	14 2	6 1	8	7
171	Traumatism by cutting or piercing instruments, {M., {F.,	11 5	.....	1	.....	.....	1	1	.....	1	2	.....	.....	3	.....

172	Traumatism by fall,	{M., F.,	795 492	8 11	24 5	9 3	4 2	2 1	47 22	22 11	25 4	26 3	33 7	44 5	39 6	41 4
173	Traumatism in mines and quarries,	{M., F.,	1,360 3	.....	.....	.....	.....	.....	.....	2	7	126	229	238	192	196
	Traumatism in mines,	{M., F.,	1,338 3	.....	.....	.....	.....	.....	.....	2	7	118	210	232	184	190
	Traumatism in quarries,	{M., F.,	52	.....	.....	.....	.....	.....	.....	.....	.....	8	10	6	8	6
174	Traumatism by machines,	{M., F.,	206 6	.....	1	.....	.....	.....	1	1	1	23	31	23	32	23
175	Traumatism by other crushing,	{M., F.,	1,824 174	4 2	6 3	9 5	13 10	14 3	46 23	84 28	65 14	102 5	197 16	225 8	193	213
	Railroad accidents and in- juries,	{M., F.,	1,292 73	1	4 2	2	1	2	10 4	24 8	29 7	81 3	169 4	185	147	159
	Street-car accidents and in- juries,	{M., F.,	187 41	.....	.....	3 3	3 6	3 1	9 11	26 11	9 1	4	10	17	19	18
	Automobile accidents and in- juries,	{M., F.,	110 32	1 .....	.....	.....	4	4	9 2	20 5	9 2	6 2	5	7	10	9
	Injuries by other vehicles, ..	{M., F.,	206 28	2	2 1	4 2	5 3	5	18 6	13 4	18 4	8	6	12	16	23
	Landslide, other crushing, ..	{M., F.,	29	.....	.....	.....	.....	.....	.....	1	.....	3	7	4	1	4
176	Injuries by animals,	{M., F.,	44 1	.....	1	.....	.....	.....	1	.....	3	2	4	2	4	3
177	Starvation,	{M., F.,	9 2	3	1	1 .....	.....	1	5 1	.....	.....	.....	.....	.....	.....	.....
178	Excessive cold,	{M., F.,	10	.....	.....	.....	.....	.....	.....	1	.....	.....	.....	.....	.....	1
179	Effects of heat,	{M., F.,	269 164	53 54	7 11	2 3	1 1	2	65 69	.....	1	3	12	12	13	22
180	Lightning,	{M., F.,	30 10	.....	.....	.....	.....	.....	.....	1	4	5	1	3	2	3
181	Electricity, (lighting excepted)	{M., F.,	69 1	.....	.....	.....	1	.....	1	2	6	7	11	15	11	5
185	Fractures (cause not specified)	{M., F.,	9	.....	.....	.....	.....	.....	.....	.....	.....	.....	2	.....	.....	.....

TABLE 2. —Continued.

International Number.	Cause of Death.	Age.													
		All ages.	Under 1.	1.	2.	3.	4.	Total Under 5.	5 to 9.	10 to 14.	15 to 19.	20 to 24.	25 to 29.	30 to 34.	35 to 39.
186	Other external violence, {M., {F.,	262 64	14 10	2 5	7 2	1 4	2 2	26 23	12 9	14 4	13 6	25 2	27 3	25 3	23 1
	Homicide (total), {M., {F.,	272 75	10 8	.....	1	1 .....	.....	12 9	2 1	3	7 7	36 14	52 11	45 10	41 9
182	Homicide by firearms, {M., {F.,	145 35	1 1	.....	.....	.....	.....	1 1	.....	1	5 4	22 6	31 5	25 7	15 6
183	Homicide by cutting or piercing (M., instruments, {F.,	53 7	.....	.....	.....	.....	.....	.....	1	1	.....	7	9	10	19
184	Homicide by other means, {M., {F.,	74 33	9 7	.....	1	1 .....	.....	11 8	1 1	1	2 3	7 8	12 4	10 1	7 1
	XIV.—ILL-DEFINED DISEASES.	1,081	292	156	25	5	4	482	18	1	4	10	12	12	24
	Males, {M.,	592	185	77	16	3	2	283	5	.....	2	5	8	4	14
	Females, {F.,	489	107	79	9	2	2	199	13	1	2	5	4	8	10
187	Ill-defined organic disease, {M., {F.,	29 61	..... 3	.....	1 .....	.....	.....	1 3	.....	.....	.....	1	1	.....	2 3
188	Sudden death, {M., {F.,	57 38	13 15	3 1	2 .....	.....	.....	18 16	1 3	.....	.....	1	2 1	2 1	5 1
189	Not specified or ill-defined, {M., {F.,	506 326	172 89	74 78	13 9	3 2	2 2	264 180	4 10	4 1	2 2	4 4	5 3	2 6	7 6
	Ill-defined, {M., {F.,	410 338	109 63	73 76	12 9	3 2	2 2	199 152	3 7	.....	2 2	3 4	5 2	2 5	6 6
	Not specified or unknown, {M., {F.,	96 52	63 26	1 2	1 .....	.....	.....	65 28	1 3	.....	.....	1	1	.....	1

TABLE 2.—Continued.

International Number.	Cause of Death.	Age.													
		40 to 44.	45 to 49.	50 to 54.	55 to 59.	60 to 64.	65 to 69.	70 to 74.	75 to 79.	80 to 84.	85 to 89.	90 to 94.	95 to 99.	100 and over.	Un-known.
	All causes,	4,429	4,711	5,294	5,407	6,212	7,054	6,907	6,015	4,204	2,274	749	164	26	19
	Males,	2,689	2,888	3,070	3,106	3,451	3,757	3,451	2,907	1,910	965	284	59	7	10
	Females,	1,740	1,823	2,224	2,301	2,761	3,297	3,456	3,108	2,294	1,309	465	105	19	9
	I.—GENERAL DISEASES,	1,546	1,510	1,561	1,563	1,530	1,436	1,149	855	481	230	67	14	.....	1
	Males,	844	794	778	756	761	649	471	372	190	106	21	5	.....	.....
	Females,	702	716	786	747	769	787	678	483	291	124	46	9	.....	1
1	Typhoid fever,	68	49	42	39	24	14	7	3	.....	.....	.....	.....	.....	.....
	{M., .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
	{F.,	43	29	26	15	9	9	11	4	3	.....	.....	.....	.....	.....
2	Typhus fever, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
	{M., .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
	{F., .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3	Relapsing fever, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
	{M., .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
	{F., .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4	Malaria,	2	3	.....	2	.....	.....	1	.....	1	.....	.....	.....	.....	.....
	{M., .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
	{F.,	1	2	.....	.....	.....	3	.....	1	.....	.....	.....	.....	.....	.....
5	Smallpox, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
	{M., .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
	{F., .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
6	Measles,	1	.....	.....	.....	.....	.....	1	.....	.....	.....	.....	.....	.....	.....
	{M.,	1	2	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
	{F., .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
7	Scarlet fever,	2	.....	1	1	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
	{M., .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
	{F., .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
8	Whooping cough, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
	{M., .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
	{F., .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
9	Diphtheria and croup,	2	2	3	1	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
	{M.,	2	1	1	2	.....	.....	1	.....	.....	.....	.....	.....	.....	.....
	{F., .....	.....	.....	.....	.....	.....	.....	.....	1	.....	.....	.....	.....	.....	.....
10	Influenza,	23	20	21	29	40	58	42	68	50	42	12	3	.....	.....
	{M.,	12	18	29	35	37	58	84	101	81	37	18	7	.....	.....
	{F., .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....

TABLE 2.—Continued.

International Number.	Cause of Death.	Age.													
		40 to 44.	45 to 49.	50 to 54.	55 to 59.	60 to 64.	65 to 69.	70 to 74.	75 to 79.	80 to 84.	85 to 89.	90 to 94.	95 to 99.	100 and over.	Un- known.
41	Of the peritoneum, Intes- {M., tines, rectum, {F.,	9 31	26 41	20 48	33 40	47 56	35 54	22 36	20 33	7 17	3 4	
42	Of the female genital organs, F.,	92	115	129	117	97	74	47	37	15	4	1	.....	.....	.....
43	Of the breast, {M., 														

TABLE 2.—Continued.

Interfinal Number.	Cause of Death.	Age.													Un- known.
		40 to 44.	45 to 49.	50 to 54.	55 to 59.	60 to 64.	65 to 69.	70 to 74.	75 to 79.	80 to 84.	85 to 89.	90 to 94.	95 to 99.	100 and over.	
65	Softening of the brain, { M., 														

	Males.	370	496	552	763	940	887	751	462	214	60	8	1
	Females.	163	318	481	562	714	701	744	559	279	92	14	1
77	Pericarditis, {M., F.,	4	3	5	3	3	7	6	2	1	.....	.....	.....
78	Acute endocarditis, {M., F.,	22	41	42	2	4	4	2	2	.....	.....	.....	.....
79	Organic diseases of the heart, {M., F.,	298	380	418	598	765	690	552	346	146	33	4	1
		216	271	348	408	588	610	579	415	151	54	6	1
80	Angina pectoris, {M., F.,	21	32	35	62	59	53	34	12	6	2	.....	.....
		11	14	13	26	27	31	30	13	10	2	.....	.....
81	Diseases of the arteries, athero- {M., sclerosis, aneurysm, etc., {F.,	26	28	38	84	103	122	151	90	57	23	4	.....
		5	23	26	51	63	94	121	115	66	35	8	.....
82	Embolism and thrombosis, {M., F.,	3	9	13	11	14	7	10	7	3	2	.....	.....
		3	9	11	13	13	13	6	10	6	1	.....	.....
83	Diseases of the veins, (varices, M., hemorrhoids, phlebitis, etc.) {F.,	2	3	1	1	1	1	3	2	1	.....	.....	.....
		7	2	.....	.....	2	3	1	1	.....	.....	.....	.....
84	Diseases of the lymphatic sys- {M., tem (lymphangitis, etc.), {F.,	1	.....	.....	1	.....	.....	.....	.....	.....	.....	.....	.....
		1	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
85	Hemorrhage, other diseases of {M., the circulatory system, {F.,	1	.....	.....	.....	.....	3	2	1	1	.....	.....	.....
		.....	1	.....	.....	1	2	2	1	3	.....	.....	.....
IV.—DISEASES OF THE RESPIRATORY SYSTEM.													
	Males.	524	534	573	636	774	808	690	545	317	105	28	.....
	Females.	314	353	348	342	396	364	295	255	126	40	9	.....
		180	181	225	284	384	444	395	320	191	65	19	.....
86	Diseases of the nasal fossae, {M., F.,	.....	.....	.....	.....	.....	1	.....	2	.....	1	.....	.....
		.....	.....	.....	.....	.....	.....	.....	4	.....	1	.....	.....
87	Diseases of the larynx, {M., F.,	1	.....	.....	1	1	.....	2	.....	1	.....	1	.....
		1	1	.....	.....	.....	1	4	.....	1	.....	.....	.....
88	Diseases of the thyroid body, {M., F.,	1	.....	.....	.....	.....	3	1	.....	.....	.....	.....	.....
		1	4	2	5	.....	.....	.....	2	.....	.....	.....	.....
89	Acute bronchitis, {M., F.,	1	3	7	5	5	12	11	18	10	3	.....	.....
		1	3	6	6	12	20	17	20	16	4	4	.....
90	Chronic bronchitis, {M., F.,	6	20	21	26	37	40	40	28	25	11	1	.....
		10	8	11	17	38	42	49	48	32	15	1	.....
91	Bronchopneumonia, {M., F.,	25	32	47	42	58	70	34	47	20	8	3	.....
		17	29	35	57	87	102	69	77	33	26	3	.....
92	Pneumonia, {M., F.,	210	245	210	210	229	177	155	93	56	13	2	.....
		35	123	142	162	200	227	268	130	73	16	1	.....

TABLE 2.—Continued.

International Number.	Cause of Death.	Age.													
		40 to 44.	45 to 49.	50 to 54.	55 to 59.	60 to 64.	65 to 69.	70 to 74.	75 to 79.	80 to 84.	85 to 89.	90 to 94.	95 to 99.	100 and over.	Un- known.
93	Lobar pneumonia, {M., F.,	141 61	155 78	148 58	130 87	120 77	150 97	87 106	68 89	35 48	22 27	6 10	1		
	Pneumonia, (undefined), {M., F.,	69 34	90 45	84 48	80 55	90 85	79 103	90 121	87 119	58 82	24 46	7 6	1 5	1	
94	Pleurisy, {M., F.,	8 8	14 9	13 10	10 6	7 6	15 11	8 7	8 10	3 8	5 5	3 3	2 2	1	
	Pulmonary congestion, pulmon- ary apoplexy, {M., F.,	5 5	7 4	4 6	12 7	14 12	10 12	19 26	18 19	19 21	10 25	2 5	1 2	1	
95	Gangrene of the lung, {M., F.,	2 5	4 4	1 1	2 1	1 2	1 2	1 1	1 1						
	Asthma, {M., F.,	10 5	15 6	18 9	19 12	23 7	21 20	23 8	17 11	8 7	4 4	1 1			
97	Pulmonary emphysema, {M., F.,	1 1	2 2		1 1		2 3		2 1			1			
	Other diseases of the respira- tory system (tuberculosis ex- cepted), {M., F.,	15 2	15 7	24 2	19 10	13 10	11 1	12 6	7 6	7 3	1				
V.—DISEASES OF THE DIGEST- IVE SYSTEM.															
99	Males, {M., F.,	327 194	377 242	486 279	393 207	489 264	504 250	580 261	409 179	271 103	150 62	45 17	7 1	3	
	Females, {M., F.,	133 133	135 135	207 136	136 136	225 225	254 254	269 269	230 230	168 168	88 88	28 28	6 6	2	
100	Diseases of the mouth and an- nexa, {M., F.,	1 2	4 4	2 2	3 3	1 1	2 2	1 1	1 1	2 1	1 2	1 1			
	Diseases of the pharynx, {M., F.,	1 2	4 4	2 2	3 3	1 1	2 2	1 1	1 1	2 1	1 2	1 1			
101	Diseases of the esophagus, {M., F.,	1 2	4 4	2 2	3 3	1 1	2 2	1 1	1 1	2 1	1 2	1 1			

129	Uterine tumor (non-cancerous), ..F.,	14	25	16	6	7	3	3	2	2	.....	.....	1	.....
130	Other diseases of the uterus, ....F.,	6	9	10	4	1	1	.....	.....	1	.....	.....	.....	.....
131	Cysts and other tumors of the ovary,	16	7	10	9	7	6	3	1	.....	1	.....	.....	.....
132	Salpingitis and other diseases of the female genital organs, .....F.,	17	8	1	1	.....	.....	.....	.....	.....	.....	.....	.....	.....
133	Non-puerperal diseases of the { M., breast (cancer excepted), { F.,	.....	.....	.....	.....	.....	.....	.....	.....	1	.....	.....	.....	.....
	VII.—THE PUERPERAL STATE,	104	15	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
134	Accidents of pregnancy, .....F.,	5	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
135	Puerperal hemorrhage, .....F.,	18	3	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
136	Other accidents of labor, .....F.,	19	4	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
137	Puerperal septicæmia, .....F.,	34	5	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
138	Puerperal albuminuria and convulsions, .....F.,	24	3	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
139	Puerperal phlegmasia alba dolens, embolus, sudden death, .....F.,	4	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
140	Following child birth (not otherwise defined), .....F.,	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
141	Puerperal diseases of the breast, F.,	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
	VIII.—DISEASES OF THE SKIN AND OF THE CELLULAR TISSUE,	13	8	17	17	23	39	40	51	56	29	10	2	.....
	Males,	9	5	11	13	11	24	24	13	31	12	4	1	.....
	Females,	4	3	6	4	12	15	16	28	25	17	6	1	.....
142	Gangrene, { M., { F.,	3	1	5	6	8	19	21	23	20	8	3	1	.....
	..... { M., { F.,	1	1	4	3	7	10	15	21	21	15	3	1	.....
143	Furuncle, { M., { F.,	2	1	4	1	2	2	2	.....	.....	1	1	.....	.....
144	Acute abscess, { M., { F.,	2	2	1	5	1	3	.....	.....	1	1	1	.....	.....
	..... { M., { F.,	1	.....	.....	.....	1	.....	1	.....	.....	.....	.....	.....	.....
145	Other diseases of the skin and annæa, { F.,	2	1	1	1	.....	3	1	.....	1	2	2	.....	.....

TABLE 2.—Continued.

International Number.	Cause of Death.	Age.												109 and over.	Un- known.
		40 to 44.	45 to 49.	50 to 54.	55 to 59.	60 to 64.	65 to 69.	70 to 74.	75 to 79.	80 to 84.	85 to 89.	90 to 94.	95 to 99.		
109	Suicide by cutting or piercing instruments, {M., F.,}	8	6 3	2	5 1	3 2	2	3	.....	1	2	.....	.....	.....
161	Suicide by jumping from high places, {M., F.,}	1	2 1	2	.....	.....	1	.....	.....	.....	1	.....	.....	.....
162	Suicide by crushing, {M., F.,}	.....	.....	1	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
163	Other suicides, {M., F.,}	.....	.....	.....	.....	.....	.....	1	.....	.....	.....	.....	.....	.....
	Accidental or undefined, (total), {M., F.,}	521 53	454 39	335 69	274 42	223 62	168 69	139 37	85 111	58 113	26 73	14 33	3 8	7 6	
164	Poisoning by food, {M., F.,}	1 1	.....	3	1 2	.....	.....	.....	.....	.....	.....	.....	.....	.....
165	Other acute poisonings, {M., F.,}	4 5	4 3	3 4	3	3 1	2	1	.....	1	.....	.....	.....	.....
166	Conflagration, {M., F.,}	6 2	3	1	2	7	2	.....	1	1	1 .....	.....	.....	.....
167	Burns (conflagration excepted) {M., F.,}	16 16	11 10	7 11	7	1 19	5 5	2 9	1 15	3	2	.....	.....	.....
168	Absorption of deleterious gases {M., (conflagration excepted) } {F.,}	12 2	8	9 7	13	5 3	5 3	8 5	.....	3 1	2	.....	.....	.....
169	Accidental drowning, {M., F.,}	24 5	23 5	27 4	15	19 3	9 2	6 1	1	1	2	.....	.....	4 6
170	Traumatism by firearms, {M., F.,}	5	5 .....	.....	.....	1	4	1	.....	.....	1	.....	.....	.....
171	Traumatism by cutting or pierc- ing instruments, {M., F.,}	.....	1	2	.....	.....	.....	1	.....	.....	.....	.....	.....	.....

172	Traumatism by fall, {M., F.,	56 8	53 6	65 18	63 13	72 25	52 36	51 60	44 78	37 88	14 61	10 30	3 6	1 1	1
173	Traumatism in mines and quar- ries, {M., F.,	150 1	120 1	62 1	43 1	19 1	10 1	4 1	1 1	.....	.....	.....	.....	.....	.....
	Traumatism in mines, {M., F.,	147 1	115 1	61 1	42 1	16 1	9 1	4 1	1 1	.....	.....	.....	.....	.....	.....
	Traumatism in quarries, {M., F.,	3 1	5 1	1 1	1 1	3 1	1 1	.....	.....	.....	.....	.....	.....	.....	.....
174	Traumatism by machines, {M., F.,	26 1	19 1	7 1	7 1	4 1	4 1	4 1	.....	.....	.....	.....	.....	.....	.....
175	Traumatism by other crushing, {M., F.,	710 7	148 8	106 13	84 10	73 8	44 7	42 8	19 1	4 2	4 1	3 1	2 1	.....	2
	Railroad accidents and in- juries, {M., F.,	137 4	108 5	83 7	50 4	17 4	15 3	22 6	14 1	3 1	1 1	2 1	.....	.....	2
	Street-car accidents and in- juries, {M., F.,	16 1	15 1	8 2	8 3	6 2	12 2	6 1	1 1	.....	.....	1 1	.....	.....	.....
	Automobile accidents and in- juries, {M., F.,	2 1	10 2	4 2	7 1	5 1	2 1	4 1	1 1	.....	.....	.....	.....	.....	.....
	Injuries by other vehicles, {M., F.,	11 2	13 2	9 2	19 2	11 1	11 1	10 1	3 1	1 1	1 1	.....	.....	.....	.....
	Landslide, other crushing, {M., F.,	4 1	2 1	2 1	.....	1 1	.....	.....	.....	.....	.....	.....	.....	.....	.....
176	Injuries by animals, {M., F.,	3 1	4 1	4 1	2 1	5 1	4 1	1 1	1 1	1 1	.....	.....	.....	.....	.....
177	Starvation, {M., F.,	1 1	.....	.....	1 1	1 1	1 1	1 1	.....	.....	.....	.....	.....	.....	.....
178	Excessive cold, {M., F.,	.....	.....	1 1	1 1	3 1	1 1	1 1	.....	1 1	.....	.....	.....	.....	.....
179	Effects of heat, {M., F.,	19 2	22 4	20 7	17 5	15 6	16 10	11 19	7 14	9 15	4 6	1 1	2 1	.....	.....
180	Lightning, {M., F.,	4 2	3 1	2 1	2 1	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
181	Electricity (lightning excepted) {M., F.,	5 1	2 1	2 1	1 1	1 1	.....	.....	.....	.....	.....	.....	.....	.....	.....
185	Fractures (cause not specified), {M., F.,	2 1	1 1	1 1	2 1	.....	.....	1 1	.....	.....	.....	.....	.....	.....	.....

TABLE 2.—Continued.

International Number.	Cause of Death.	Age.													
		40 to 44.	45 to 49.	50 to 54.	55 to 59.	60 to 64.	65 to 69.	70 to 74.	75 to 79.	80 to 84.	85 to 89.	90 to 94.	95 to 99.	100 and over.	Un- known.
186	Other external violence, {M., F.,	17 1	17 2	13 4	10	13 1	9 2	4	6 2	1 1	2.....	.....	.....	.....	.....
	Homicide, (total), {M., F.,	33 4	13 3	17 2	7 2	1	3 1	2.....	.....	.....	.....	.....	.....	.....	.....
182	Homicide by firearms, {M., F.,	20 2	6 2	10 2	6	1	2.....	.....	.....	.....	.....	.....	.....	.....	.....
183	Homicide by cutting or piercing {M., instruments, {F.,	4	2 .....	.....	1.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
184	Homicide by other means, {M., F.,	9 2	5 1	7	1 1	.....	1	2.....	.....	.....	.....	.....	.....	.....	.....
	XIV.—ILL-DEFINED DISEASES.	36	43	39	56	71	80	67	43	46	21	13	2	1	.....
	Males, {M.,	23	26	25	32	42	42	32	19	18	7	3	1	.....	.....
	Females, {F.,	13	17	14	24	29	38	34	24	28	14	10	1	.....	.....
187	Ill-defined organic disease, {M., F.,	3	1 3	2 2	2 2	3 5	3 6	1 10	3 8	4 5	1 3	.....	1	.....	.....
188	Sudden death, {M., F.,	2	4 1	3 1	1 1	4 4	4 3	5 3	3 2	1 2	1 2	.....	.....	.....	.....
189	Not specified or ill-defined, {M., F.,	21 10	21 13	20 11	29 21	35 23	34 29	24 29	13 14	13 22	5 9	3 4	.....	1	.....
	Ill-defined, {M., F.,	17 9	17 12	19 11	26 20	30 22	32 22	13 19	11 13	13 15	4 6	3 3	.....	1	.....
	Not specified or unknown, {M., F.,	4 1	4 1	1	3 1	5 1	2 1	5 2	2 1	.....	1 3	1 1	.....	.....	.....

MORTALITY TABLE 3.

Deaths by age periods for the entire State; for all municipalities having more than 10,000 population, for certain municipalities by color; and for the rural sections of each county, including all municipalities having less than 10,000 population. (Stillbirths excluded.)

	Ages.															
	All ages.	Un- der 1.	1	2	3	4	Total Un- der 5.	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49
Total cities,	57,909	11,827	2,655	1,123	780	560	16,945	1,387	767	1,378	2,248	2,362	2,484	2,928	2,674	2,861
Albion,	824	200	24	13	13	8	258	21	12	19	30	33	37	37	37	31
Altoona,	125	125	16	11	8	3	103	11	11	9	34	22	22	20	30	28
Beaver Falls,	166	36	12	4	2	1	55	3	2	3	6	12	9	9	4	9
Bethlehem,	181	133	5	1	1	3	43	6	6	7	6	8	1	1	6	6
Braddock,	352	128	37	11	10	3	189	15	2	10	16	15	10	11	16	11
Bradford,	212	19	3	1	1	3	26	2	4	9	7	8	8	4	10	12
Buffalo,	241	56	11	2	2	2	72	8	5	5	16	13	9	9	11	10
Canastota,	291	48	7	8	3	1	66	4	6	12	11	16	19	20	13	12
Carlisle (total),	171	23	1	2	1	1	28	1	4	7	4	2	2	9	7	6
White,	143	21	1	2	1	1	24	1	4	4	4	2	2	8	6	3
Colored,	28	2	1	1	1	1	4	1	1	3	2	2	2	1	1	3
Carnegie,	92	46	6	1	1	1	53	4	1	1	1	1	3	1	8	2
Chambersburg,	195	24	4	1	3	4	36	5	2	2	2	16	3	3	7	21
Chester (total),	603	133	42	6	7	5	193	3	3	19	26	19	26	32	27	19
White,	511	113	34	6	5	3	161	3	3	13	23	16	22	32	20	15
Colored,	92	20	8	1	2	2	32	1	1	6	3	3	4	5	7	5
Conitessville (total),	127	34	7	3	2	2	46	2	1	1	5	4	8	4	7	4
White,	104	28	6	3	2	2	39	1	1	1	4	3	3	7	6	2
Colored,	23	6	1	1	1	1	7	1	1	1	1	1	1	1	1	2
Columbia,	144	26	3	2	2	2	35	5	1	5	5	5	5	5	3	5
Councilville,	189	34	3	2	2	1	40	6	1	15	9	15	13	11	9	5
Dubuque,	133	28	8	1	1	1	38	2	5	4	10	10	5	4	5	6
Dunmore,	319	139	25	6	5	1	176	3	3	5	7	5	7	11	10	9
Duquesne,	181	67	27	6	3	2	104	5	5	3	5	8	5	4	10	11
Easton,	486	74	16	8	4	4	104	7	18	15	15	22	27	22	14	26
Ellettsville,	215	34	13	13	8	7	277	13	22	45	42	49	44	49	50	54
Total,	1,102															

TABLE 3.—Continued.

	All ages.	Un- der 1.	Ages.					Total Un- der 5.	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49
			1	2	3	4	5-9									
Greensburg,	208	26	2	.....	2	3	33	2	6	9	18	20	14	17	12	15
Harrisburg,	900	157	22	12	9	8	208	19	12	24	42	45	45	41	50	45
Hazleton,	337	74	4	.....	5	3	94	6	6	17	12	15	12	12	20	22
Honolulu,	230	85	27	12	7	4	111	11	8	21	15	11	29	41	28	34
Johnstown,	839	234	62	15	13	8	332	28	8	24	32	50	29	41	28	35
Lancaster,	694	81	21	5	8	10	125	25	6	25	30	24	22	21	29	33
Lebanon,	397	55	2	2	2	1	65	17	6	3	4	11	9	11	8	13
McKees Rocks,	165	77	21	6	3	1	108	2	1	4	4	4	4	5	8	4
McKeesport,	634	159	30	14	6	6	215	14	11	17	42	50	41	36	26	31
Mahanoy City,	278	97	30	15	12	6	160	16	2	4	10	10	6	6	7	8
Meadville,	174	20	4	1	.....	.....	25	3	6	4	4	8	6	7	8	3
Monessen,	139	63	19	7	5	3	97	4	4	1	1	8	9	4	6	4
Mount Carmel,	191	65	10	2	1	2	80	6	5	5	6	12	14	8	14	13
Nanticoke,	286	83	17	8	6	5	129	6	4	6	12	4	22	23	22	25
Newcastle,	534	121	31	13	11	4	180	13	9	13	21	25	22	23	22	25
Norristown,	624	62	13	5	4	8	92	11	3	15	25	24	22	29	46	40
North Braddock,	142	44	15	12	5	3	79	6	3	2	4	9	5	5	.....	5
Oil City,	213	42	11	3	2	1	59	7	1	2	12	7	6	6	7	8
Old Forge,	167	64	8	6	2	.....	80	7	5	3	5	10	10	10	7	2
Philadelphia (total),	26,276	4,769	1,151	530	357	273	7,080	592	298	584	986	994	1,138	1,441	1,271	1,398
White,	24,251	4,312	1,038	493	333	253	6,429	547	262	483	866	863	987	1,274	1,141	1,261
Colored,	2,025	457	37	37	24	20	651	45	36	49	114	131	151	167	130	137
Phoenixville,	192	44	6	11	.....	3	64	5	3	3	11	9	5	7	8	3
Pittsburgh (total),	8,009	1,812	453	168	100	76	2,690	216	113	192	319	355	376	425	394	409
White,	7,656	1,730	422	158	92	71	2,473	198	105	175	323	337	359	393	369	382
Colored,	40	82	31	10	8	5	136	18	8	17	26	18	17	42	25	27
Pittston,	290	61	19	9	3	6	98	6	2	4	12	15	18	21	16	10
Plymouth,	252	87	22	7	5	2	123	7	3	3	10	1	12	10	10	10
Pottsville,	211	39	9	6	3	.....	59	3	2	8	6	11	6	5	2	6
Pottsville,	387	66	10	6	5	.....	86	14	8	14	23	17	14	20	22	15
Reading,	1,408	276	54	28	27	13	398	34	26	40	42	53	47	47	56	43
Scranton,	1,974	387	87	33	31	17	555	37	31	63	86	96	94	101	118	121

	55	12	4	5	76	9	6	8	7	5	7	12	12	14
Shamokin,	251	55	12	4	5	.....	1	57	7	5	7	12	12	14
Sharon,	190	42	5	4	57	5	5	10	6	12	12	12	12	14
Shenandoah,	506	187	44	29	297	23	6	10	15	13	9	16	11	21
South Bethlehem,	308	139	15	6	164	5	3	10	13	10	13	12	5	11
South Sharon,	112	52	10	.....	65	3	2	1	1	5	6	8	6	2
Steelton,	188	74	14	3	98	9	4	2	10	4	4	6	4	3
Sunbury,	381	31	1	2	39	9	3	3	7	6	8	7	7	7
Uniontown,	107	18	3	3	57	2	3	12	13	21	22	10	8	8
Washington,	167	18	.....	.....	57	4	1	5	4	2	3	5	2	2
Washington,	280	38	7	4	53	9	4	6	7	17	20	16	13	15
West Chester (total),	237	35	5	8	50	6	7	5	8	7	5	11	9	5
White,	192	23	2	6	32	5	5	1	1	5	5	3	7	5
Colored,	45	12	3	2	18	1	2	4	1	2	.....	3	.....	.....
Wilkes-Barre,	1,072	223	31	7	279	26	21	31	45	56	53	75	59	62
Wilkesburg,	252	39	4	1	49	8	4	9	13	8	7	20	11	12
Williamsport,	519	72	13	5	98	9	9	10	20	20	24	31	22	25
York,	659	124	20	9	162	11	9	16	23	22	17	26	21	27
State total rural,	53,383	12,568	2,443	954	16,813	1,243	786	1,251	1,776	1,815	1,670	1,884	1,755	1,850
Adams,	448	77	11	9	94	8	2	4	8	10	7	17	11	11
Allegheny,	4,628	1,199	274	77	1,657	96	69	102	176	196	210	273	211	275
Armstrong,	841	228	41	21	311	25	18	25	35	48	35	22	18	28
Beaver,	960	319	41	17	293	18	10	17	43	44	45	41	27	33
Bedford,	427	84	17	5	107	9	4	10	18	10	6	4	13	7
Berks,	1,213	232	41	13	314	36	13	28	36	38	39	36	28	32
Blair,	687	171	27	10	219	10	14	15	22	20	26	26	26	22
Bradford,	877	113	25	9	154	8	10	18	29	19	26	27	30	23
Bucks,	1,660	152	22	12	507	20	10	18	34	27	31	34	31	20
Butler,	560	113	18	7	150	7	7	14	12	16	16	16	12	12
Cambria,	1,362	507	112	20	708	49	20	24	45	50	40	37	43	35
Cameron,	78	12	1	9	19	3	.....	3	8	10	8	10	1	6
Carlton,	734	219	49	11	300	21	6	15	18	21	19	22	17	16
Centre,	514	94	17	8	133	11	12	13	13	12	8	17	11	13
Chester,	1,143	297	29	15	273	17	17	31	28	35	22	32	24	33
Clarion,	408	77	16	2	99	9	4	11	12	16	15	12	9	8
Clearfield,	846	253	39	16	323	18	11	19	29	24	20	29	19	20
Clinton,	394	60	8	5	81	6	5	6	11	9	13	12	13	15
Columbia,	576	124	22	8	161	11	13	8	16	16	17	16	9	10
Crawford,	661	73	11	1	94	3	10	18	13	15	16	13	17	29
Cumberland,	591	101	9	9	195	10	6	16	15	11	19	14	18	20
Doubling,	800	141	29	6	181	23	13	15	24	24	36	26	31	30
Delaware,	1,016	163	22	18	223	27	17	27	38	38	45	44	46	46
Elk,	1,423	123	16	8	150	19	6	27	27	27	32	17	15	20
Erle,	686	179	15	3	105	10	6	9	23	27	16	13	16	21

TABLE 3.--(continued).

	All ages.	Un- der 1.	1	2	3	4	Total Un- der 5.	Ages.							40-44	45-49
								5-9	10-11	15-19	20-24	25-29	30-34	35-39		
Fayette,	1,952	715	290	71	40	21	1,047	54	29	31	60	58	48	78	49	48
Forest,	74	18	.....	2	1	.....	21	.....	.....	3	3	1	1	2	3	2
Franklin,	868	132	20	6	5	.....	166	14	11	41	62	50	33	50	44	32
Fulton,	171	38	2	4	4	.....	48	1	1	4	4	3	3	1	6	4
Greene,	306	42	11	5	5	.....	64	9	2	7	6	13	8	11	10	7
Huntingdon,	480	96	21	10	5	5	137	12	6	13	9	13	16	13	9	9
Indiana,	884	265	51	23	16	17	372	27	13	24	31	32	29	32	23	17
Jefferson,	765	195	30	18	11	8	262	14	13	21	34	30	27	31	23	31
Junata,	138	23	5	.....	1	.....	29	2	4	4	4	4	5	4	5	3
Lackawanna,	1,381	465	80	35	18	16	554	31	19	37	59	45	52	79	66	66
Lancaster,	1,375	216	40	18	8	6	288	19	24	18	29	31	30	31	41	49
Lawrence,	369	95	20	4	4	4	127	6	7	11	12	14	16	12	16	7
Lebanon,	497	109	22	7	3	6	147	12	5	9	8	13	16	7	16	15
Lehigh,	1,061	254	43	12	9	9	327	21	18	35	43	30	30	18	38	23
Luzerne,	2,875	879	179	83	41	22	1,204	86	36	80	105	100	92	112	109	133
Lycoming,	530	74	12	1	5	1	93	9	6	15	23	18	10	11	29	16
McKeon,	378	76	10	5	4	2	97	7	7	6	7	14	14	13	16	11
Mercer,	666	93	21	15	6	5	140	15	15	19	16	12	22	22	18	13
Mifflin,	357	64	7	6	5	1	83	6	8	8	8	10	13	16	7	14
Monroe,	317	48	10	4	3	4	69	8	9	6	14	7	6	11	7	9
Montgomery,	1,327	299	53	23	13	16	404	35	20	42	62	45	45	47	52	55
Morehead,	294	29	5	3	2	.....	42	3	3	7	2	7	9	20	10	16
Northampton,	681	286	43	16	16	11	372	22	15	30	25	27	25	18	33	46
Northumberland,	740	177	26	17	15	9	244	20	14	20	20	20	24	30	21	32
Perry,	592	41	5	2	3	4	55	5	4	6	4	4	7	5	7	6
Pike,	110	10	4	.....	.....	.....	14	.....	1	1	3	6	2	6	5	4
Potter,	419	50	11	.....	6	.....	78	11	11	13	20	11	17	21	14	16
Schuylkill,	2,229	596	144	50	39	25	854	82	44	55	65	96	79	84	87	87
Snyder,	207	30	3	3	3	3	42	3	1	7	6	6	2	3	5	3
Somerset,	923	288	52	15	14	6	375	19	11	23	42	39	36	32	29	30

	140	44	4	2	2	52	3	2	4	4	1,004	1,005	953	1,122	1,076	1,153
Sullivan,	543	79	12	10	2	110	3	4	3	3	15	12	9	7	5	5
Susquehanna,	530	57	7	3	1	22	2	7	8	10	16	9	13	11	18	18
Toga,	263	31	3	4	1	36	10	3	2	2	20	6	1	3	7	16
Union,	462	50	3	3	2	65	10	11	25	20	13	17	13	12	6	21
Venango,	414	43	3	3	4	56	4	4	8	73	94	12	14	17	25	25
Warren,	1,859	523	134	60	25	755	61	30	52	20	9	11	10	65	70	60
Washington,	377	35	7	8	2	52	6	3	9	9	23	9	10	23	14	12
Wayne,	2,471	783	176	56	41	1,077	87	34	48	106	106	79	103	77	68	68
Westmoreland,	1,195	15	5	3	.....	23	5	1	5	3	5	5	5	7	5	14
Wyoming,	1,047	238	28	14	13	302	36	13	21	35	27	24	34	29	19	19
York,	29,366	7,004	1,292	487	356	9,374	603	446	693	1,004	1,005	953	1,122	1,076	1,153	
State total rural (males), ..																
Adams,	924	48	4	.....	1	54	5	1	3	3	3	2	5	9	7	8
Alliough,	2,742	683	160	44	42	953	51	40	11	98	128	136	129	147	158	158
Armstrong,	454	15	6	5	6	183	11	11	15	13	13	10	16	11	17	17
Beaver,	499	129	20	8	6	165	5	2	9	28	28	28	22	19	20	20
Bedford,	213	48	8	3	.....	59	5	1	6	10	5	1	2	6	4	4
Berks,	655	126	22	6	6	168	18	6	16	15	17	23	20	17	21	21
Blair,	360	90	16	5	7	119	4	8	4	10	9	8	17	17	14	14
Bradford,	456	64	13	3	2	84	4	7	9	14	10	11	13	12	12	12
Bucks,	561	83	14	6	8	115	5	7	11	19	15	15	14	19	14	14
Butler,	273	59	9	3	2	74	7	3	3	8	9	10	10	4	5	5
Cambria,	782	294	57	20	17	398	21	11	15	22	34	26	18	21	27	27
Carlisle,	49	8	1	.....	1	12	.....	.....	.....	1	1	2	3	.....	3	3
Carlton,	417	121	26	3	5	161	12	4	6	11	21	9	16	19	33	33
Centre,	256	52	6	2	3	74	4	5	10	7	4	7	7	4	7	7
Chester,	596	110	13	8	7	144	8	10	16	20	16	13	17	13	24	24
Clarion,	23	47	11	2	1	63	5	2	6	7	7	7	8	9	6	5
Clarke,	472	145	19	11	3	180	12	5	12	19	15	10	13	11	11	11
Clinton,	222	39	3	1	2	46	4	4	2	8	8	7	7	7	10	10
Columbia,	365	70	8	4	1	84	6	9	2	5	9	9	6	7	5	6
Crawford,	362	46	7	.....	.....	57	1	6	9	6	7	10	9	8	18	18
Cumberland,	317	62	6	5	2	78	6	3	3	6	2	10	7	11	13	13
Dauphin,	406	88	14	5	2	167	8	6	8	11	12	10	17	16	21	21
Delaware,	546	100	21	6	3	139	8	11	17	13	23	23	18	22	24	24
Elk,	219	60	11	3	2	76	4	4	4	19	8	7	8	7	4	4
Erw,	394	46	7	1	.....	57	5	2	6	13	12	10	12	11	10	10
Fayette,	1,081	384	104	40	21	559	36	22	16	36	41	30	52	31	29	29
Forest,	50	13	.....	1	1	15	.....	.....	.....	.....	.....	1	.....	1	1	1
Franklin,	473	72	12	3	2	90	6	4	22	31	22	22	34	24	20	20
Fulton,	89	22	2	1	2	27	.....	1	1	1	1	.....	.....	.....	3	3
Greene,	144	26	6	2	1	36	5	.....	4	1	1	2	.....	2	2	2

TABLE 3.—Continued.

	All ages.	Un- der 1.	1	2	3	4	Total Un- der 5.	Ages.							40-44	45-49
								5-9	10-14	15-19	20-24	25-29	30-34	35-39		
Huntingdon,	239	54	7	3	1	1	66	3	2	5	5	6	7	6	5	6
Indiana,	476	154	26	8	10	10	208	11	7	11	17	13	11	22	12	11
Jefferson,	440	103	20	11	7	6	147	5	5	11	24	20	11	23	11	20
Junata,	100	15	2	.....	.....	.....	17	.....	12	4	3	3	3	2	2	2
Lackawanna,	876	232	42	18	11	11	314	11	12	23	39	36	41	58	54	46
Laureate,	709	199	18	5	4	4	160	12	15	9	11	17	14	16	23	27
Lawrence,	187	51	10	2	3	2	68	2	5	5	4	8	11	4	4	3
Lebanon,	244	54	15	5	2	2	79	6	2	4	6	11	6	3	7	6
Lehigh,	560	139	25	7	4	4	179	8	11	23	30	19	11	21	20	22
Luzerne,	1,705	528	92	46	26	13	705	41	26	46	66	67	54	69	79	108
Lycoming,	265	84	6	.....	2	1	43	4	4	9	10	8	5	6	16	9
McKean,	214	41	7	1	2	1	52	5	6	3	9	12	10	10	9	7
Mercer,	356	52	12	7	4	2	77	6	8	8	10	8	8	15	11	7
Mifflin,	187	32	4	3	2	1	42	4	6	4	3	5	9	7	4	5
Monroe,	179	25	6	3	1	3	38	4	5	4	6	3	2	7	4	4
Montgomery,	855	154	27	15	11	8	215	18	10	23	33	24	24	21	25	23
Montour,	145	15	3	1	1	2	22	1	9	2	2	3	3	4	10	9
Northampton,	164	104	26	11	14	5	212	11	6	14	11	18	12	7	22	27
Northumberland,	400	106	16	11	11	7	145	31	8	14	8	12	7	13	13	18
Perry,	150	23	2	.....	1	1	27	2	2	4	4	1	4	4	3	2
Pike,	62	7	3	.....	.....	.....	10	1	1	1	3	3	1	2	3	2
Potter,	187	27	5	5	3	3	43	4	6	4	6	4	4	3	12	6
Schenck,	1,307	332	75	21	17	13	458	40	26	35	41	69	51	63	63	59
Snyder,	108	18	3	2	2	1	26	.....	1	3	4	3	.....	3	4	1
Somerset,	537	152	32	8	6	4	202	14	7	13	20	26	31	25	21	21
Sullivan,	79	25	2	.....	.....	2	29	1	1	2	.....	1	.....	2	2	3
Susquehanna,	294	44	6	5	5	1	81	7	4	2	15	8	7	6	6	6
Tioga,	264	31	4	1	1	.....	38	.....	2	2	4	3	.....	1	1	2
Union,	181	18	4	2	1	.....	30	4	2	1	4	4	.....	.....	6	3
Venango,	237	31	7	3	.....	2	49	4	7	16	5	4	8	8	1	10

Warren,	225	23	.....	2	1	1	27	27	2	2	6	5	7	12	7	12
Washington,	1,028	293	62	33	15	2	471	27	13	24	45	52	48	41	44	42
Wayne,	213	25	97	27	.....	1	33	2	1	5	7	7	8	14	6	8
Westmoreland,	1,398	451	94	27	20	6	598	39	25	28	69	66	44	65	50	41
Wyoming,	116	5	4	2	.....	.....	11	4	.....	1	3	3	4	6	4	9
York,	530	150	17	6	5	6	184	17	4	12	17	10	9	17	13	7

TABLE 3. —Continued.

Ages.													Conjugal Condition.			
50-54	55-59	60-64	65-69	70-74	75-79	80-84	85-89	90-94	95-99	100+	Unk.	Sg.	Mr.	Wd.	Dv.	Un.
Total cities,																
3,204	3,063	3,341	3,530	3,192	2,553	1,716	899	291	61	10	4	27,513	19,607	9,832	142	815
25	42	56	41	49	44	32	19	7	.....	.....	.....	372	285	162	2	3
27	32	35	41	40	40	17	9	3	.....	.....	.....	251	257	108	1	4
11	4	3	12	8	6	.....	2	.....	.....	.....	.....	81	58	24	.....	3
12	12	19	12	11	18	13	5	1	.....	.....	.....	69	61	50	1	.....
14	14	8	10	7	2	.....	.....	.....	.....	.....	.....	241	96	15	.....	.....
21	17	13	22	19	17	9	3	1	.....	.....	.....	53	105	53	.....	1
7	7	16	13	13	8	7	8	.....	.....	.....	.....	116	83	40	1	1
13	10	19	23	22	14	9	3	1	.....	1	.....	124	115	55	.....	.....
15	17	17	23	12	12	6	8	.....	1	.....	.....	58	63	47	1	2
16	6	14	20	11	11	5	7	.....	.....	.....	.....	47	55	38	1	.....
2	1	3	3	1	1	1	1	.....	1	.....	.....	11	8	9	.....	.....
.....	2	3	6	2	3	.....	1	.....	.....	.....	.....	67	19	6	.....	.....
12	16	17	33	20	19	5	3	3	.....	2	.....	71	62	57	.....	5
24	40	40	32	28	23	24	6	2	1	.....	.....	289	207	100	.....	1
18	24	35	26	27	23	23	6	.....	.....	.....	.....	238	181	89	.....	3
6	6	5	6	1	.....	1	.....	.....	1	.....	.....	51	26	11	.....	4
6	10	4	5	9	7	3	1	.....	.....	.....	.....	67	43	17	.....	.....
.....	4	3	4	8	6	3	1	.....	.....	.....	.....	55	37	12	.....	.....
2	2	1	1	1	1	.....	.....	.....	.....	.....	.....	12	6	5	.....	.....
11	6	12	9	14	5	5	7	4	.....	6	.....	61	53	29	.....	1
8	14	10	9	8	5	4	3	4	1	.....	.....	84	80	22	.....	3
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	63	49	20	1	.....
6	5	8	4	8	7	4	2	.....	.....	.....	.....	211	71	37	.....	.....
15	11	13	11	6	9	11	.....	3	.....	.....	.....	125	47	9	.....	.....
5	3	1	5	2	7	.....	.....	.....	.....	.....	.....	192	191	101	.....	2
24	32	24	28	36	32	33	13	1	1	.....	.....	472	409	215	1	5
44	67	49	90	83	63	36	18	5	2	.....	.....	84	96	27	.....	1
9	9	7	4	8	11	6	5	.....	1	.....	.....	397	385	230	5	3
57	70	66	66	69	65	41	19	6	.....	.....	.....	153	131	50	2	1
19	20	17	27	11	12	9	4	.....	.....	.....	.....	174	39	16	.....	.....
8	6	3	6	4	1	3	.....	1	.....	.....	.....	474	252	99	.....	.....
36	30	32	35	25	29	14	12	6	.....	.....	1	.....	.....	.....	.....	1

Lancaster,	39	42	38	58	47	64	36	23	5	1	1	251	244	100	5	4
Lebanon,	17	20	21	22	27	2	12	2	3	.....	.....	118	119	70	.....	.....
McKees Rocks,	3	3	16	22	27	2	10	2	.....	.....	.....	118	35	9	.....	.....
McKeesport,	29	25	19	22	27	2	12	10	.....	.....	.....	322	248	58	.....	.....
Mahanoy City,	9	6	8	9	7	6	1	1	2	.....	.....	263	53	18	.....	.....
Mendville,	12	11	19	14	12	14	5	6	2	.....	.....	60	76	32	2	.....
Monessen, .....	.....	.....	1	3	4	.....	1	.....	.....	.....	.....	108	22	7	.....	.....
Mount Carmel,	10	4	11	8	5	2	3	.....	.....	.....	.....	118	61	12	.....	.....
Nanticoke,	18	14	11	15	8	4	3	1	1	.....	.....	157	96	31	1	.....
Newcastle,	25	16	30	29	27	.....	17	4	3	2	.....	274	184	66	2	8
Norristown,	52	36	47	43	49	35	35	16	4	.....	.....	242	220	148	5	9
North Braddock,	15	10	19	18	17	10	.....	.....	.....	.....	.....	92	39	11	.....	.....
Oil City, .....	.....	.....	.....	.....	.....	.....	.....	4	.....	.....	.....	86	78	48	.....	.....
Old Forge,	9	4	6	8	8	.....	.....	.....	.....	.....	.....	108	46	12	.....	.....
Philadelphia (total),	1,594	1,484	1,651	1,680	1,483	1,218	827	450	117	.....	.....	8,705	8,705	4,851	41	567
White,	1,488	1,412	1,584	1,619	1,433	1,197	805	441	140	32	4	12,138	8,111	4,587	41	484
Colored,	104	72	67	61	50	21	16	9	7	3	2	1,068	594	261	1	83
Phoenixville,	9	13	12	8	10	8	11	3	.....	.....	.....	98	62	32	.....	.....
Pittsburgh (total),	451	410	423	427	410	265	167	81	22	1	1	4,127	2,716	1,176	59	51
White,	422	389	403	415	396	261	166	79	20	1	.....	3,853	2,584	1,103	58	48
Colored,	32	21	20	12	14	4	1	2	2	.....	.....	294	132	73	1	3
Pittston,	17	12	4	17	13	10	4	1	.....	.....	.....	148	95	32	.....	5
Plymouth,	13	5	11	13	6	8	4	3	.....	.....	.....	119	69	31	.....	3
Portstown,	13	17	18	17	16	18	12	4	.....	.....	.....	90	79	41	.....	1
Portsville,	19	22	21	17	18	16	12	10	.....	.....	.....	177	140	68	1	1
Reading,	69	84	96	100	104	62	50	18	17	.....	.....	616	515	265	10	2
Scranon,	100	118	101	119	90	56	50	16	5	2	1	382	137	285	4	6
Shamokin,	11	20	18	14	10	10	8	2	1	1	.....	121	83	45	.....	2
Sharon,	6	5	8	8	19	10	12	2	3	.....	.....	91	58	34	.....	2
Schuadonah,	12	13	13	12	13	11	8	1	.....	.....	.....	364	98	37	.....	1
South Bethlehem,	10	8	8	14	15	6	5	3	2	.....	.....	187	93	37	.....	1
South Sharon, .....	.....	5	1	5	1	1	.....	.....	.....	.....	.....	74	30	7	.....	1
Steelton,	4	5	4	11	12	.....	1	.....	.....	.....	.....	121	45	20	1	1
Staubury,	7	11	14	21	18	14	4	1	.....	.....	.....	68	66	41	2	1
Uniontown,	3	3	9	8	8	1	5	1	.....	.....	.....	120	73	20	.....	2
Warren,	10	3	11	8	10	.....	.....	.....	.....	.....	.....	31	46	22	.....	.....
Washington,	14	.....	14	12	22	13	8	2	4	.....	.....	107	109	40	3	1
West Chester (total),	5	21	10	19	21	15	17	12	3	1	.....	99	80	55	.....	3
White,	5	18	9	11	21	11	14	11	3	1	.....	72	69	47	.....	3
Colored, .....	.....	3	1	2	.....	.....	.....	.....	.....	.....	.....	26	11	8	.....	.....
Wilkes-Barre,	59	55	65	63	46	37	21	8	4	1	.....	478	382	145	.....	6
Wilkesburg,	13	18	10	20	17	16	12	3	1	1	.....	104	97	47	.....	1
Williamsport,	36	30	40	37	45	28	20	12	1	1	.....	195	208	111	2	3
York,	42	35	47	46	42	51	33	20	4	.....	.....	293	242	115	1	2

TABLE 3. —Continued.

	Ages.										Conjugal Condition.						
	50-54	55-59	60-64	65-69	70-74	75-79	80-84	85-89	90-94	95-99	100+	Unk.	Sg.	Mr.	Wd.	Dv.	Un.
State total rural.	2,069	2,324	2,871	3,524	3,715	3,467	2,548	1,384	458	103	16	15	25,357	17,917	9,326	168	555
Adams.	16	34	19	40	54	48	31	21	6	1	.....	.....	150	170	120	1	7
Allegheny.	223	181	210	226	236	167	122	79	19	6	1	.....	2,512	1,398	688	12	68
Armstrong.	28	27	39	50	47	60	41	23	7	2	.....	.....	412	292	101	2	4
Bacon.	32	33	42	50	66	34	41	21	7	.....	.....	.....	435	291	143	5	26
Baldwin.	16	22	16	46	45	30	41	13	7	2	1	.....	170	154	96	1	6
Berks.	35	69	86	101	109	108	60	38	4	3	.....	.....	524	418	254	3	14
Blair.	27	39	39	46	47	39	39	19	10	1	.....	.....	308	222	147	1	9
Bradford.	34	44	70	79	91	80	71	38	17	9	.....	.....	258	375	237	5	7
Bucks.	55	51	66	101	91	109	76	56	20	2	1	.....	388	395	251	5	21
Butler.	21	24	22	31	64	50	31	24	8	.....	.....	.....	248	184	124	.....	4
Cambria.	39	42	55	46	46	43	25	14	5	1	.....	.....	888	330	131	3	10
Cameron.	2	5	3	7	8	4	3	4	.....	.....	.....	.....	34	31	13	.....	4
Carlton.	28	26	28	34	44	33	22	17	5	.....	.....	.....	409	234	95	1	4
Centre.	14	33	21	37	46	35	38	16	3	.....	.....	.....	269	197	105	1	2
Chester.	41	51	71	91	115	104	81	45	20	4	2	.....	482	376	273	2	8
Clarion.	14	16	32	29	39	41	26	11	5	.....	.....	.....	153	171	82	1	4
Clearfield.	31	21	60	52	49	43	26	17	6	2	.....	.....	434	266	138	4	4
Clinton.	13	27	26	41	40	33	25	13	4	1	.....	.....	137	154	93	3	4
Columbia.	29	31	33	50	53	49	36	20	4	3	.....	.....	228	211	133	2	2
Crawford.	28	39	55	56	78	59	59	30	13	5	.....	.....	195	308	148	6	7
Cumberland.	29	29	41	64	76	59	34	18	5	1	.....	.....	205	238	141	2	5
Dauphin.	23	50	56	69	68	70	31	19	3	2	.....	.....	339	275	179	3	4
Delaware.	57	48	65	80	65	71	55	25	17	3	1	.....	430	366	196	1	23
Elk.	11	17	14	24	26	16	12	12	3	.....	.....	.....	217	127	51	1	1
Erie.	24	48	58	53	69	76	62	26	15	2	.....	.....	138	308	174	4	2
Fayette.	56	53	70	67	53	56	42	26	11	3	.....	.....	1,207	461	164	2	18
Forest.	3	3	3	6	7	7	4	2	.....	.....	.....	.....	27	37	9	.....	1
Franklin.	29	33	41	64	64	63	42	20	2	.....	.....	.....	359	299	154	6	10
Fulton.	8	6	12	13	9	22	16	11	1	.....	.....	.....	68	60	42	.....	1
Greene.	8	10	13	23	31	31	39	16	6	1	.....	.....	123	111	69	.....	2

TABLE 3. —Continued.

	Ages.										Conjugal Condition.						
	50-54	55-59	60-64	65-69	70-74	75-79	80-84	85-89	90-94	95-99	100+	Unk.	Sg.	Mr.	Wd.	Dv.	Un.
Berks,	17	36	42	59	62	65	33	18	2	.....	.....	.....	296	221	135	2	11
Blair,	12	20	20	28	23	17	17	9	4	.....	.....	.....	163	127	62	1	7
Bradford,	17	25	39	45	45	45	31	16	8	5	.....	.....	155	219	73	2	7
Bucks,	28	32	38	57	43	62	33	23	9	1	1	.....	218	218	101	5	19
Butler,	14	11	14	20	38	25	13	10	2	.....	.....	.....	120	115	36	.....	2
Cambria,	28	33	36	25	25	22	9	7	3	1	.....	.....	521	196	54	2	10
Cameron,	1	4	1	6	4	4	3	3	.....	.....	.....	.....	23	14	5	.....	.....
Carlton,	16	17	13	18	27	16	11	5	3	.....	.....	1	297	143	42	1	4
Centre,	5	18	18	23	22	23	21	8	2	.....	.....	.....	112	105	37	.....	2
Chester,	23	27	40	52	57	54	35	16	9	2	.....	.....	253	228	108	1	6
Clarion,	7	9	11	21	17	21	12	6	1	.....	.....	.....	96	96	80	.....	1
Clearfield,	15	22	22	38	32	24	17	5	3	1	.....	.....	253	155	58	2	4
Columbia,	7	14	18	21	25	19	12	5	.....	.....	.....	.....	83	95	37	3	4
Columbia,	12	22	17	29	28	24	20	9	1	1	.....	.....	125	125	51	2	2
Crawford,	15	23	33	32	47	25	33	18	4	1	.....	.....	122	170	58	5	7
Cumberland,	11	14	22	31	39	32	15	9	4	2	.....	.....	114	145	54	1	3
Dauphin,	12	28	32	36	31	24	14	5	.....	.....	.....	.....	198	147	59	3	4
Delaware,	33	33	35	47	31	32	25	9	3	.....	.....	.....	240	219	71	1	15
Elk,	9	11	9	17	15	8	7	6	.....	.....	.....	.....	123	67	22	1	6
Elk,	12	31	39	27	40	53	32	14	6	2	.....	.....	116	198	74	4	2
Erie, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Fayette,	28	36	44	39	22	26	17	9	7	1	.....	.....	738	293	66	2	17
Forest,	12	6	2	4	4	4	3	2	.....	.....	.....	.....	19	25	5	.....	1
Franklin,	16	21	20	39	27	29	22	14	.....	.....	.....	.....	286	168	58	3	8
Fulton,	4	2	7	11	4	12	5	6	1	.....	.....	.....	39	37	15	.....	1
Greene,	5	4	7	8	16	15	11	7	4	.....	.....	.....	57	58	26	1	2
Huntingdon,	10	12	19	25	14	22	18	7	1	.....	.....	.....	97	108	35	.....	4
Indiana,	14	20	18	28	16	27	27	7	1	1	.....	.....	275	153	40	1	7
Jefferson,	9	17	17	29	29	23	17	8	3	.....	.....	.....	210	182	41	.....	7
Junata,	7	4	6	8	11	12	11	4	.....	.....	.....	.....	31	38	28	1	2
Lackawanna,	44	31	57	25	25	26	8	14	2	.....	.....	.....	479	398	71	4	14

Lancaster,	27	29	46	69	73	66	56	23	9	1	.....	.....	279	303	114	1	12
Lawrence,	6	8	7	5	12	10	11	4	3	.....	.....	.....	97	58	20	.....	12
Lebanon,	5	6	19	19	16	19	15	11	.....	.....	.....	.....	113	86	41	.....	2
Lehigh,	21	32	23	23	40	40	28	8	.....	.....	.....	.....	187	83	3	.....	10
Luzerne,	88	89	73	58	57	38	29	14	6	1	.....	.....	1,010	538	129	.....	28
Lycening,	10	12	19	27	21	28	22	8	4	.....	.....	.....	98	125	40	.....	.....
McKean,	7	15	12	7	13	16	9	4	2	.....	.....	.....	91	80	33	.....	6
Merced,	21	14	25	28	33	26	23	8	.....	.....	.....	.....	123	57	39	.....	1
Mifflin,	1	10	15	17	15	17	16	4	1	.....	.....	.....	177	74	35	.....	1
Monroe,	10	11	9	16	15	17	16	.....	.....	.....	.....	.....	73	73	32	.....	.....
Montgomery,	35	42	54	90	56	74	47	20	9	.....	.....	.....	361	315	132	.....	16
Montour,	7	8	16	12	18	15	7	2	.....	.....	.....	.....	52	68	19	.....	4
Northampton,	15	26	24	42	24	39	18	9	2	.....	.....	.....	294	174	67	.....	3
Northumberland,	13	15	30	15	31	24	9	12	1	.....	.....	.....	207	141	48	.....	4
Perry,	6	11	20	16	23	21	5	1	2	.....	.....	.....	49	73	33	.....	3
Pike,	2	4	5	9	3	4	3	5	.....	.....	.....	.....	21	26	13	.....	2
Potter,	7	10	15	13	12	19	6	3	.....	.....	.....	.....	75	85	17	.....	7
Schuykill,	67	48	58	72	63	41	32	3	.....	.....	.....	.....	734	432	108	.....	12
Snyder,	4	3	11	14	14	13	13	5	.....	.....	.....	.....	40	48	50	.....	.....
Sourcel,	17	16	17	25	22	30	12	14	4	.....	.....	.....	294	175	40	.....	27
Sullivan,	6	2	.....	10	6	6	3	.....	2	.....	.....	.....	37	30	10	.....	2
Susquehanna,	15	15	23	29	32	28	17	8	4	.....	.....	.....	100	136	46	.....	1
Tioga,	15	20	20	24	32	22	28	11	4	.....	.....	.....	73	137	45	.....	7
Union,	5	6	7	19	10	10	7	2	1	.....	.....	.....	38	47	17	.....	1
Venango,	11	12	19	19	26	18	9	8	4	.....	.....	.....	104	94	35	.....	2
Warren,	13	18	16	29	21	18	5	17	.....	.....	.....	.....	83	99	38	.....	3
Washington,	30	32	37	43	42	38	28	20	3	.....	.....	.....	619	313	82	.....	12
Wayne,	7	10	15	21	19	17	16	13	2	.....	.....	.....	66	107	37	.....	1
Westmoreland,	53	51	50	54	57	43	45	10	5	.....	.....	.....	856	418	88	.....	29
Wyoming,	8	6	11	11	9	11	11	2	.....	.....	.....	.....	31	64	16	.....	4
York,	13	26	21	41	52	43	24	14	1	.....	.....	.....	258	189	78	.....	2

MORTALITY TABLE 4.

Deaths, from certain specified causes, for each municipality in the State having more than 10,000 population, and for the rural section of each county including all municipalities having less than 10,000 population. (Stillbirths excluded.)

Area.	All causes.	Typhoid fever.	Malaria.	Smallpox.	Measles.	Scarlet fever.	Whooping cough.	Diphtheria-croup.	Influenza.	Erysipelas.	Tuberculosis of lungs.	Tuberculous meningitis.	Other tuberculosis.	Rheumatism.	Cancer.	Diabetes.	Meningitis.	Apoplexy.
Total cities.	57,909	891	16		473	494	380	1,127	417	139	5,262	392	447	286	2,845	602	338	2,818
White.	14,769	859	15	4	452	421	344	1,112	407	135	4,698	376	402	276	2,763	593	327	2,742
Colored.	3,140	32	1		21	73	36	15	10	4	564	16	45	10	92	9	11	76
Allentown.	824	25				3	3	25	3	1	63	6	9	10	38	13	9	82
Altoona.	621	15			3		4	4	7		44	3	3	3	29	12	2	35
Beaver Falls.	166	9			6		3	5			10	2	1	1	4			5
Bethlehem.	181	11			15	1	1	9	3		12	1	1	1	6	2	1	21
Bradock.	352	2					1				21	1			7		2	6
Bradford.	212	3									14		2	1	16	6	2	17
Burlington.	241	8					3	6			26		1		9	2	2	9
Cambridge.	234	1				4	1	1	7	1	16	1	2	1	14	3	1	23
Carlisle (total).	172	1							3		12	1	1	1	12	1	4	14
White.	143	1									12	1	1	1	12	1	4	13
Colored.	28										4				2			1
Carnegie.	92					2	1	1	1		6	1	1	1		4	1	3
Chambersburg.	195	3					1	1	4	1	20	1	2		16	1	6	12
Chester (total).	603	7			1		1	6	6	2	83	2	3		28	6	3	24
White.	511	4			1		1	5	4	1	77	1	5		25	6	2	22
Colored.	92	3						1	2	1	6	1			3			2
Coatesville (total).	127							3	1		18		3		5	2		3
White.	104							3	1		14		3		4	1		3
Colored.	53	2									4				1			1
Columbia.	144										10	2			6			5
Connellsville.	189	7					1	4	2	1	8		1		11	1	1	6

TABLE 4. —Continued.

Area.	All causes.	Typhoid fever.	Malaria.	Smallpox.	Measles.	Scarlet fever.	Whooping cough.	Diphtheria—croup.	Influenza.	Erysipelas.	Tuberculosis of lungs.	Tuberculous meningitis.	Other tuberculosis.	Rheumatism.	Cancer.	Diabetes.	Meningitis.	Apoplexy.
West Chester (total),	937	6	.....	.....	1	.....	2	2	2	.....	12	1	3	2	19	2	1	16
White,	8	.....	.....	.....	1	.....	.....	.....	.....	.....	10	1	.....	2	16	2	1	14
Colored,	142	8	.....	.....	1	.....	.....	2	2	.....	2	.....	.....	.....	.....	.....	.....	2
Adams,	4	.....	.....	.....	.....	.....	.....	.....	.....	.....	53	3	1	.....	44	10	8	53
Wilkes-Barre,	1,072	8	1	.....	3	2	6	14	.....	2	16	3	3	2	27	4	4	20
Wilkesburg,	252	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Williamsport,	519	15	1	.....	2	1	.....	3	6	1	35	3	5	3	27	5	2	48
York,	659	11	.....	1	.....	.....	7	14	4	4	54	3	12	4	43	13	4	59
State total—rural,	53,833	925	21	1	331	325	618	984	732	148	3,971	175	357	293	2,352	434	369	3,418
White,	52,451	898	21	1	329	325	597	981	723	147	3,774	168	342	279	2,330	431	364	3,378
Colored,	982	17	.....	.....	2	.....	21	3	9	1	197	7	15	4	22	3	5	40
Adams,	418	9	.....	.....	1	.....	3	.....	7	.....	35	2	6	1	27	7	3	73
Albany,	4,358	68	.....	.....	26	35	77	65	45	11	463	17	34	22	163	17	34	196
Arlington,	52	.....	.....	.....	.....	.....	.....	.....	.....	.....	48	3	5	5	28	4	3	52
Beaver,	906	27	.....	.....	2	5	12	15	8	2	76	3	15	4	42	5	9	47
Bedford,	427	8	.....	.....	3	.....	1	.....	5	3	27	2	2	2	25	2	1	31
Berks,	1,212	19	.....	.....	8	9	5	39	13	2	105	3	5	11	59	15	11	116
Blair,	687	7	.....	.....	3	.....	8	.....	10	1	33	1	.....	4	31	10	6	39
Bradford,	877	24	.....	.....	11	1	8	5	33	.....	32	2	5	5	60	10	3	80
Bucks,	1,060	18	1	.....	.....	.....	4	10	22	.....	95	4	12	6	65	17	7	93
Butler,	560	13	.....	.....	6	2	11	10	6	2	36	2	5	2	33	4	2	42
Cambria,	1,362	28	.....	.....	21	6	24	23	7	3	72	5	12	10	47	7	7	36
Cameron,	78	1	.....	.....	.....	2	2	2	5	.....	3	.....	.....	.....	4	.....	.....	4
Carbon,	734	7	.....	.....	2	14	4	21	4	3	43	5	1	4	26	5	7	43
Center,	514	16	1	.....	.....	5	6	6	8	1	19	1	7	4	34	3	8	44
Chester,	1,143	18	1	.....	5	1	10	7	18	1	103	4	11	2	54	9	8	94
Clarion,	408	12	1	.....	2	.....	9	4	10	1	26	.....	6	.....	23	5	2	30
Clearfield,	846	10	.....	.....	3	.....	12	13	.....	3	36	10	6	6	33	12	9	46
Clinton,	394	5	1	.....	.....	1	6	.....	9	1	26	3	3	2	30	6	4	35
Columbia,	576	.....	.....	.....	.....	.....	8	.....	.....	.....	32	.....	.....	.....	23	7	7	57
Crawford,	664	9	.....	.....	2	2	8	4	15	5	32	.....	7	2	33	7	5	65

Cumberland,	591	6	2	.....	3	.....	10	13	1	45	1	1	3	2	32	11	5	57
Dauphin,	800	6	.....	1	2	.....	28	13	6	99	2	2	5	5	44	10	1	62
Delaware,	1,016	5	.....	5	.....	7	16	8	2	112	9	13	13	6	44	3	1	77
Elk,	403	4	.....	6	.....	15	3	12	4	4	1	1	6	1	20	3	7	28
Erie,	686	10	2	.....	1	5	7	15	4	48	1	1	6	5	44	7	3	62
Fayette,	1,952	49	.....	53	3	35	52	10	4	110	5	8	14	14	57	6	19	52
Franklin,	74	.....	.....	.....	2	4	13	7	.....	290	2	.....	3	3	43	7	.....	61
Fulton,	863	11	.....	1	.....	4	.....	7	4	14	.....	.....	.....	10	1	1	5	10
Greene,	306	3	.....	1	.....	8	3	14	.....	30	2	.....	1	3	22	2	.....	18
Huntingdon,	480	8	.....	2	3	21	6	8	1	30	1	3	6	6	27	2	1	43
Indiana,	884	19	1	.....	6	4	28	17	1	58	6	5	5	3	28	5	6	34
Jefferson,	765	27	.....	3	7	18	20	15	1	46	2	7	5	5	37	3	6	29
Junata,	198	1	1	.....	5	1	.....	2	.....	18	1	.....	3	6	6	2	1	15
Lackawanna,	1,391	9	.....	4	11	12	34	18	7	65	7	6	4	24	11	9	9	67
Lancaster,	1,375	14	.....	4	6	10	12	26	4	118	6	6	8	8	76	15	10	123
Lawrence,	389	6	1	.....	1	.....	3	10	2	22	1	1	1	1	17	3	1	7
Lebanon,	497	10	1	.....	2	.....	10	6	.....	37	.....	3	3	2	24	3	2	48
Lehigh,	1,921	13	.....	7	.....	11	23	15	.....	11	.....	2	2	3	35	10	6	102
Luzerne,	2,575	16	2	.....	21	27	52	27	13	198	8	6	11	89	17	16	113	50
Lycoming,	520	11	.....	.....	.....	1	10	10	.....	31	1	2	6	6	30	9	7	50
McKean,	378	7	.....	3	.....	1	2	6	.....	21	1	1	4	2	15	3	3	19
Mercer,	666	16	.....	9	11	14	6	13	4	36	1	4	4	2	51	10	4	41
Mifflin,	357	6	.....	2	1	1	4	4	1	25	1	3	2	2	28	1	32	31
Monroe,	317	1	.....	.....	2	.....	6	3	.....	20	1	1	4	4	20	6	1	31
Montgomery,	1,637	28	.....	5	2	8	31	24	6	169	6	14	9	9	87	10	14	129
Montour,	294	7	.....	.....	.....	.....	3	3	.....	21	.....	.....	.....	.....	19	6	.....	25
Northampton,	981	12	.....	6	6	11	21	7	5	75	4	3	9	3	31	8	10	83
Northumberland,	740	9	1	.....	8	11	4	17	1	50	1	4	1	4	22	5	4	52
Perry,	302	8	.....	.....	1	.....	5	2	.....	20	.....	2	2	1	13	1	1	23
Pike,	110	.....	.....	.....	.....	1	.....	2	.....	12	.....	.....	.....	2	3	1	.....	12
Porter,	419	8	.....	4	.....	3	5	12	.....	10	2	.....	.....	.....	3	6	.....	30
Schuylkill,	2,433	15	1	.....	21	30	57	15	8	111	6	12	10	10	68	20	12	120
Snyder,	207	.....	.....	.....	.....	.....	1	.....	.....	18	.....	1	1	1	19	1	.....	38
Southern,	923	20	.....	3	1	7	19	13	2	30	3	8	4	4	33	1	9	36
Sullivan,	140	.....	.....	.....	.....	.....	1	1	.....	8	.....	1	.....	.....	5	2	.....	8
Susquehanna,	543	1	.....	1	2	5	1	16	2	32	1	.....	1	1	22	7	.....	8
Tioga,	530	12	.....	.....	.....	2	2	20	1	19	1	.....	6	3	34	4	3	39
Union,	203	2	.....	.....	1	.....	.....	14	1	14	1	3	.....	.....	15	4	3	16
Venango,	462	10	.....	9	1	1	.....	12	1	54	.....	8	.....	.....	29	5	2	37
Warren,	414	5	.....	.....	1	2	1	8	1	24	1	.....	2	2	19	6	.....	27
Washington,	1,859	33	1	.....	19	8	25	26	2	128	10	12	9	9	62	9	10	52
Wayne,	377	6	.....	.....	.....	2	2	15	.....	32	2	3	.....	.....	27	4	29	4
Westmoreland,	2,471	42	1	.....	18	31	63	50	8	136	10	18	16	16	100	13	18	96
Wyoming,	135	1	.....	.....	.....	3	1	2	1	10	1	1	.....	.....	3	1	1	12
York,	1,047	14	2	.....	1	1	31	9	3	92	1	7	6	6	49	7	8	95

TABLE 4. —Continued.

Area.	All causes.	Typhoid fever.	Malaria.	Smallpox.	Measles.	Scarlet fever.	Whooping cough.	Diphtheria-croup.	Influenza.	Erysipelas.	Tuberculosis of lungs.	Tuberculous meningitis.	Other tuberculosis.	Rheumatism.	Cancer.	Diabetes.	Meningitis.	Apoplexy.
State total—rural (males),	29,366	471	13	1	162	155	291	520	354	69	2,064	85	184	138	902	182	194	1,814
White,	28,844	462	13	1	160	155	275	518	349	69	1,968	82	172	134	892	181	191	1,793
Colored,	522	9	.....	.....	2	.....	16	2	5	.....	96	3	12	4	10	1	3	21
Adams,	224	4	.....	.....	1	.....	1	.....	4	.....	15	.....	2	1	13	1	1	38
Allegheny,	2,712	40	.....	.....	8	22	84	16	22	3	280	9	22	10	60	2	18	108
Armstrong,	434	12	.....	.....	.....	1	7	13	.....	.....	20	.....	5	4	12	2	.....	27
Baer,	459	18	.....	.....	.....	.....	6	11	2	1	46	1	2	.....	11	1	6	26
Bedford,	213	4	.....	.....	.....	.....	.....	2	1	2	16	2	2	.....	7	1	1	20
Berks,	655	12	.....	.....	8	7	3	18	7	2	57	.....	3	6	19	7	9	63
Blairstown,	390	3	.....	.....	.....	.....	4	3	7	.....	13	.....	3	3	12	2	2	32
Bradford,	456	13	.....	.....	1	.....	4	4	20	.....	9	1	2	3	17	2	4	45
Bucks,	561	7	1	.....	2	1	3	6	13	.....	47	3	7	2	26	6	1	53
Butler,	273	6	.....	.....	2	2	3	5	.....	1	15	1	4	.....	10	3	.....	21
Cambria,	783	16	.....	.....	9	2	10	13	4	.....	38	3	7	5	20	3	4	20
Cameron,	49	.....	.....	.....	2	2	1	.....	2	.....	3	.....	1	.....	.....	.....	.....	4
Carlton,	417	3	.....	.....	2	5	.....	11	3	1	24	1	.....	3	7	.....	.....	23
Centre,	256	3	1	.....	3	3	1	3	7	.....	8	.....	3	2	10	3	4	23
Chester,	596	13	.....	.....	3	1	4	3	.....	.....	57	2	5	.....	22	4	5	48
Clarion,	223	4	1	.....	.....	.....	2	4	5	3	12	1	5	3	9	2	1	13
Clearfield,	323	8	.....	.....	1	.....	5	9	3	.....	14	.....	1	2	7	9	2	32
Clinton,	223	3	.....	.....	.....	.....	.....	1	1	1	9	2	.....	1	8	5	.....	20
Columbia,	302	.....	1	.....	1	2	3	4	6	.....	16	.....	.....	2	8	4	5	30
Crawford,	382	2	.....	.....	1	1	1	3	6	1	13	.....	3	2	18	2	2	33
Cumberland,	217	3	1	.....	.....	.....	.....	4	9	.....	14	1	2	1	13	4	4	31
Dauphin,	406	11	.....	.....	1	.....	4	11	7	3	52	.....	2	1	13	4	.....	35
Delaware,	546	2	.....	.....	1	1	5	10	3	.....	60	4	9	1	17	5	.....	17
Elk,	219	2	.....	.....	1	1	8	1	9	1	8	.....	1	.....	6	1	.....	16
Esle,	394	15	1	.....	.....	.....	2	4	10	3	24	1	3	1	23	5	1	36

Fayette,	1,061	29	.....	.....	31	2	18	34	4	1	53	.....	5	8	21	4	12	31
Forest,	50	6	.....	.....	1	.....	.....	5	3	1	191	1	2	1	21	1	2	15
Franklin,	473	.....	.....	.....	.....	.....	.....	.....	1	1	5	.....	.....	.....	5	1	1	35
Fulton,	89	1	.....	.....	.....	.....	.....	.....	1	1	16	.....	1	1	8	1	1	6
Greene,	144	1	.....	.....	.....	.....	.....	.....	8	.....	.....	.....	.....	.....	.....	.....	.....	8
Huntingdon,	239	.....	.....	.....	1	2	8	1	3	.....	13	1	1	5	15	2	1	25
Indiana,	476	12	1	.....	2	1	12	9	3	.....	20	3	2	1	15	2	3	9
Jefferson,	440	17	.....	.....	3	4	12	10	7	.....	24	2	2	1	15	2	6	9
Junata,	100	.....	.....	.....	3	.....	.....	.....	1	.....	11	.....	.....	.....	3	1	.....	16
Lackawanna,	876	6	.....	.....	3	3	6	16	11	3	40	5	4	1	10	4	.....	42
Lancaster,	709	9	.....	.....	4	3	4	8	12	2	54	3	3	6	19	5	4	58
Lebanon,	187	.....	.....	.....	1	.....	2	4	.....	.....	11	.....	.....	.....	7	1	.....	3
Lehigh,	344	6	1	.....	2	2	2	4	3	.....	19	.....	.....	2	6	1	.....	92
Luzerne,	560	12	.....	.....	4	1	3	17	4	.....	35	5	2	1	17	4	.....	155
Lycoming,	1,705	8	1	.....	12	5	14	56	14	7	109	5	3	7	34	5	6	51
Lycoming,	265	7	.....	.....	.....	.....	.....	3	3	.....	16	1	1	3	15	5	3	34
McKean,	214	4	.....	.....	2	.....	3	1	4	.....	11	.....	3	2	7	1	1	11
Mercer,	376	5	.....	.....	4	6	9	3	9	2	19	1	1	1	18	4	3	53
Mifflin,	187	5	.....	.....	.....	.....	1	1	3	.....	14	1	1	1	10	1	.....	20
Monroe,	179	.....	.....	.....	.....	2	.....	1	2	.....	13	1	1	2	11	4	.....	17
Montgomery,	855	13	.....	.....	3	2	4	16	12	4	73	5	5	4	37	5	8	68
Montour,	145	4	.....	.....	.....	.....	.....	.....	.....	.....	10	.....	1	.....	16	2	12	4
Northampton,	341	9	.....	.....	5	7	6	14	3	4	20	2	1	.....	13	2	5	42
Northumberland,	490	5	.....	.....	1	.....	2	9	5	.....	23	.....	.....	4	19	2	19	19
Perry,	139	6	.....	.....	6	1	.....	2	.....	.....	12	.....	2	1	7	.....	1	12
Pike,	62	.....	.....	.....	.....	.....	.....	.....	.....	.....	5	.....	.....	.....	2	.....	.....	5
Potter,	187	.....	.....	.....	1	1	.....	3	2	.....	4	1	1	1	9	2	1	4
Scharikill,	1,307	11	1	.....	5	32	14	28	13	2	70	2	6	5	27	5	4	64
Snyder,	108	4	.....	.....	.....	.....	1	1	1	.....	10	.....	.....	1	5	1	2	16
Somerset,	537	11	.....	.....	3	.....	3	10	4	.....	9	2	6	3	18	.....	6	14
Sullivan,	79	.....	.....	.....	.....	.....	.....	1	.....	.....	3	.....	.....	.....	3	.....	.....	3
Susquehanna,	294	.....	.....	.....	1	2	2	1	13	.....	16	1	.....	.....	6	3	4	22
Tioga,	264	10	.....	.....	.....	.....	1	10	1	.....	10	1	1	.....	10	2	16	16
Union,	103	2	.....	.....	.....	.....	.....	.....	6	.....	7	.....	2	.....	4	1	10	10
Venango,	237	6	.....	.....	7	.....	1	.....	.....	.....	22	.....	3	.....	12	.....	.....	18
Warren,	235	3	.....	.....	.....	.....	1	1	3	.....	5	1	.....	.....	10	4	.....	16
Washington,	1,978	17	.....	.....	9	2	12	25	11	2	27	4	5	4	1	4	.....	23
Wayne,	1,978	16	.....	.....	1	.....	.....	.....	.....	.....	20	1	1	.....	13	3	3	23
Westmoreland,	1,393	24	1	.....	12	19	11	32	9	7	71	3	10	8	31	6	11	57
Wyoming,	119	1	.....	.....	.....	.....	.....	2	2	.....	5	1	.....	.....	9	1	.....	8
York,	530	7	1	.....	1	.....	18	17	3	1	44	1	5	4	14	1	3	48

TABLE 4.—Continued.

Area.	Organic heart disease.	Broncho-pneumonia.	Pneumonia (lobar, and unqualified).	Other respiratory diseases.	Diseases of stomach.	Diarrhoea, and enteritis (under 2 years.)	Appendicitis.	Hernia, intestinal obstruction.	Cirrhosis of liver.	Nephritis.	Puerperal sepsis.	Other puerperal.	Congenital debility, and malformations.	Violent deaths (excluding suicide).	Suicide.	Ill defined, and unknown.	All other cases.
Total cities.	5,344	2,431	3,574	775	.....	4,428	492	504	620	4,413	338	361	2,404	3,955	582	300	8,534
White.	5,036	2,274	3,340	723	.....	4,214	475	478	602	4,108	322	344	3,219	3,778	575	286	8,166
Colored.	308	157	234	52	.....	214	17	26	18	305	16	17	185	177	7	14	418
Allentown.	56	13	49	4	.....	60	9	6	7	61	2	1	78	45	3	18	115
Altoona.	60	1	53	12	.....	20	6	4	8	51	6	5	50	43	3	1	114
Beaver Falls.	10	1	9	.....	.....	11	.....	.....	6	9	.....	3	10	20	.....	3	36
Bethlehem.	16	3	7	2	.....	12	1	.....	2	16	1	.....	11	5	.....	.....	38
Bradock.	13	47	20	3	.....	61	.....	3	2	14	7	.....	28	27	2	.....	30
Bradford.	27	4	17	2	.....	5	1	1	4	15	1	.....	8	19	5	.....	42
Butler.	18	2	16	4	.....	20	3	4	1	21	3	.....	18	10	.....	1	34
Carbondale.	17	8	41	9	.....	18	2	4	7	16	2	6	16	36	2	1	34
Carlisle (total).	16	5	11	4	.....	8	.....	2	1	16	1	.....	5	7	1	1	34
White.	11	4	9	4	.....	6	.....	1	1	13	1	.....	5	5	1	1	29
Colored.	5	1	2	.....	.....	2	.....	1	.....	3	.....	.....	.....	2	.....	.....	5
Carnegie.	6	5	5	.....	.....	18	.....	.....	2	5	.....	.....	14	5	.....	.....	10
Chambersburg.	20	10	10	4	.....	4	1	1	.....	20	.....	1	10	6	.....	2	42
Cherryton.	63	20	16	6	.....	45	4	3	.....	33	1	5	46	36	.....	5	89
White.	33	23	31	5	.....	42	4	3	4	23	1	4	39	32	5	5	111
Colored.	18	3	13	1	.....	5	.....	.....	.....	4	.....	1	7	.....	.....	.....	18
Coatesville (total).	20	2	4	2	.....	11	.....	.....	.....	12	.....	1	14	8	.....	.....	17
White.	12	2	4	2	.....	10	.....	.....	.....	11	.....	1	11	7	.....	.....	13
Colored.	8	.....	.....	.....	.....	1	.....	.....	.....	1	.....	.....	3	1	.....	.....	4
Columbia.	29	2	12	1	.....	3	4	1	2	9	2	.....	17	10	.....	2	23
Connellsville.	7	2	10	1	.....	3	1	.....	3	9	2	.....	19	42	4	4	28
Dubols.	9	4	7	2	.....	8	1	2	1	5	2	1	14	14	1	.....	30
Dunmore.	18	11	36	3	.....	45	1	1	1	14	.....	1	25	16	3	1	62
Duquesne.	7	2	14	3	.....	29	.....	1	2	6	.....	1	23	11	.....	2	22
Easton.	49	11	33	5	.....	18	9	3	2	34	5	6	37	59	.....	12	158
Erie.	112	34	57	7	.....	86	13	12	19	63	4	6	61	69	8	1	162

Greensburg,	8	2	4	16	1	.....	2	7	4	1	7	1	3	10	46	3	11	29
Harrisburg,	106	10	26	50	17	.....	41	80	10	11	80	4	5	70	77	12	7	169
Hazleton,	25	12	10	19	6	.....	24	26	5	2	26	2	4	25	34	.....	4	60
Homestead,	11	4	14	12	4	.....	41	10	.....	3	10	2	1	16	6	2	.....	32
Johnstown,	42	4	19	89	10	.....	78	36	7	9	36	3	3	70	73	4	10	146
Lancaster,	91	8	10	30	4	.....	24	66	6	3	66	5	3	36	37	6	1	119
Lebanon,	20	3	6	12	7	.....	12	20	2	1	20	.....	1	19	22	3	10	63
McKees Rocks,	7	2	23	4	.....	32	.....	1	1	1	1	1	1	21	13	.....	2	25
McKeesport,	35	14	28	57	5	.....	58	32	6	7	32	5	3	49	69	10	3	102
Manahy City,	11	6	8	28	18	.....	32	1	1	1	6	2	2	18	15	.....	5	57
Meadville,	24	.....	2	13	2	.....	5	8	3	1	8	.....	1	10	12	4	.....	26
Monaca,	9	4	5	9	5	.....	32	2	.....	.....	2	.....	.....	12	11	.....	9	14
Monaca,	12	.....	4	16	5	.....	27	10	.....	1	10	2	4	13	22	3	9	24
Northbrook,	8	10	13	33	4	.....	39	20	4	.....	20	.....	2	21	37	.....	3	33
Newcastle,	31	6	5	49	5	.....	18	18	9	2	18	6	5	34	37	5	23	99
Norristown,	73	5	45	29	4	.....	17	51	5	4	51	3	2	21	35	2	.....	151
North Braddock,	3	3	20	6	1	.....	19	6	1	1	6	2	.....	9	13	2	1	12
Oil City,	18	1	11	8	1	.....	8	16	3	4	16	.....	1	14	13	.....	4	43
Old Forge,	11	11	15	4	.....	17	.....	6	.....	2	6	.....	1	15	22	.....	1	24
Philadelphia (total),	2,862	414	1,091	1,421	348	.....	1,864	2,599	218	264	2,599	128	147	1,274	1,410	275	47	3,635
White,	2,677	368	983	1,289	311	.....	1,707	2,437	186	252	2,437	116	135	1,167	1,318	271	42	3,380
Colored,	185	46	108	132	37	.....	157	172	13	20	172	12	12	107	92	4	5	255
Phoenixville,	20	2	1	16	2	.....	14	7	1	4	7	.....	2	16	13	4	.....	82
Pittsburgh (total),	671	197	528	526	158	.....	707	400	73	131	400	56	48	518	578	103	18	1,127
White,	668	197	492	492	157	.....	671	371	71	138	371	56	48	523	583	107	17	1,121
Colored,	3	7	35	42	7	.....	36	29	2	3	29	.....	2	35	65	3	1	54
Pittston,	11	9	11	31	3	.....	19	10	2	2	10	1	.....	20	57	2	10	36
Plymouth,	13	3	8	13	7	.....	52	4	.....	1	4	3	3	23	20	.....	3	82
Portstown,	22	2	5	23	1	.....	20	9	1	2	9	.....	1	20	9	1	3	32
Pottsville,	37	1	12	19	2	.....	28	38	9	8	38	8	5	15	29	1	.....	60
Reading,	125	19	27	48	17	.....	93	88	12	14	88	7	10	85	85	28	31	222
Scranton,	125	48	115	152	25	.....	231	19	22	24	99	19	14	42	226	12	3	298
Shamokin,	27	2	5	19	6	.....	13	12	.....	3	12	2	1	18	14	2	5	50
Sharon,	15	4	12	8	4	.....	.....	8	3	1	8	1	1	17	23	3	2	29
Shenandoah,	9	11	10	34	11	.....	78	12	5	3	12	3	1	44	54	3	10	68
South Bethlehem,	16	2	6	13	4	.....	63	15	.....	3	15	.....	3	37	12	3	1	53
South Sharon,	2	4	1	11	1	.....	18	6	.....	1	6	.....	1	14	6	2	1	18
Steelton,	18	.....	2	13	2	.....	21	2	.....	2	2	.....	.....	27	8	1	.....	19
Shenandoah,	24	2	5	12	2	.....	10	14	5	.....	14	2	2	12	12	1	.....	33
Uniontown,	13	1	5	15	3	.....	18	13	2	7	13	2	7	19	39	3	1	30
Warren,	14	1	.....	15	3	.....	2	4	1	.....	4	1	.....	8	8	1	1	26
Washington,	18	3	9	18	1	.....	10	12	2	2	12	2	1	16	24	3	1	45
West Chester (total),	24	2	7	9	4	.....	4	32	3	4	32	3	2	14	22	4	1	42
White,	24	2	6	5	3	.....	4	12	3	4	12	3	2	9	20	4	1	42
White,	2	.....	1	4	1	.....	.....	3	.....	.....	3	.....	.....	3	3	.....	1	31
Wilkes-Barre,	68	24	42	62	18	.....	91	82	22	13	82	10	10	63	143	2	11	165
Wilkesburg,	27	14	14	12	2	.....	9	11	1	3	11	2	4	16	15	4	3	35

TABLE 4. —Continued.

Area.	Organic heart disease.	Bronchitis.	Pneumonia (lobar, and unqualified.)	Other respiratory diseases.	Diseases of stomach.	Diarrhoea, and enteritis (under 2 years.)	Appendicitis.	Hernia, intestinal obstruction.	Cirrhosis of liver.	Nephritis.	Puerperal sepsis.	Other puerperal.	Congenital debility, and malformations.	Violent deaths (excluding suicide.)	Suicide.	Ill defined, and unknown.	All other causes.
Williamsport.	49	9	13	40	5	17	9	6	4	38	5	6	24	36	3	2	96
York.	57	12	19	24	4	37	4	5	8	58	1	9	46	34	4	.....	105
State total—rural.	4,759	724	1,712	3,245	806	3,728	192	351	450	2,782	235	362	3,883	4,363	451	781	9,215
White.	4,703	715	1,680	3,184	796	3,679	191	344	442	2,721	232	360	3,831	4,294	447	765	9,069
Colored.	56	9	32	61	10	49	1	7	8	61	3	2	52	69	4	16	146
Adams.	56	4	14	19	3	26	.....	3	2	26	2	2	22	15	.....	2	78
Allegheny.	313	76	262	280	76	443	13	31	63	132	21	24	342	363	34	21	801
Armstrong.	79	10	42	34	16	42	2	4	9	37	3	9	81	72	4	16	146
Beaver.	79	12	54	60	7	49	1	7	8	29	4	6	84	98	9	6	150
Bedford.	43	4	11	23	7	16	1	5	4	23	4	3	34	17	.....	12	99
Becks.	103	18	29	54	20	59	3	10	8	59	7	6	72	49	27	37	232
Blair.	133	6	14	41	8	39	4	3	5	53	2	2	64	49	6	9	141
Bradford.	102	14	31	45	15	26	6	8	7	65	4	7	29	52	10	9	156
Bucks.	119	10	21	36	19	42	4	5	10	94	7	2	62	67	16	8	179
Butter.	59	10	18	28	7	24	2	3	4	16	1	3	35	36	4	20	114
Cambria.	75	10	64	97	20	154	6	11	14	56	6	12	170	129	13	23	194
Cameron.	9	.....	1	6	.....	3	.....	1	1	6	.....	.....	4	10	.....	4	11
Carbon.	46	13	33	46	17	71	2	5	11	32	5	6	65	65	4	9	115
Centre.	64	7	10	26	6	7	6	4	7	24	2	4	37	42	2	6	107
Chester.	141	15	28	62	13	69	2	6	5	89	3	6	73	71	7	9	193
Clarion.	57	9	9	19	3	14	4	1	5	25	1	3	32	26	3	5	68
Cleaveland.	47	4	29	37	20	62	4	7	1	41	3	10	26	38	7	15	155
Columbia.	79	3	14	23	8	34	1	6	2	53	3	4	26	31	5	9	96
Crawford.	102	9	17	28	6	39	4	5	8	21	3	4	37	37	1	12	127
Cumberland.	68	6	18	33	8	23	.....	3	4	43	10	4	26	32	10	4	136
Dauphin.	79	6	19	32	9	47	.....	7	4	31	.....	2	41	31	1	8	123
Delaware.	112	5	26	69	12	50	3	7	8	83	1	7	45	45	6	11	162
Elk.	28	6	11	32	7	28	4	1	4	15	3	6	44	34	.....	1	56
Erie.	94	8	13	42	8	14	2	13	7	34	3	3	32	53	15	9	116

TABLE 4.—Continued.

Area.	Organic heart disease.	Bronchitis.	Broncho-pneumonia.	Pneumonia (lobar, and unqualified).	Other respiratory diseases.	Diseases of stomach.	Diarrhoea, and enteritis (under 2 years).	Appendicitis.	Hernia, intestinal obstruction.	Cirrhosis of liver.	Nephritis.	Puerperal sepsis.	Other puerperal.	Congenital debility, and malformations.	Violent deaths (excluding suicide).	Suicide.	Ill defined, and unknown.	All other cases.
State, total—rural (males).	2,550	347	883	1,890	460	.....	2,067	120	189	299	1,537	.....	.....	2,166	3,493	362	433	5,001
White.	2,516	313	866	1,768	455	.....	2,043	119	186	294	1,531	.....	.....	2,143	3,435	300	424	4,915
Colored.	34	4	17	122	5	.....	24	1	3	5	36	.....	.....	23	57	2	9	86
Adams.	29	3	6	9	1	.....	15	.....	2	1	15	.....	.....	10	9	.....	.....	43
Allegheny.	190	40	139	162	40	.....	261	9	17	43	124	.....	.....	191	309	28	11	488
Armstrong.	53	4	22	18	9	.....	23	2	3	7	13	.....	.....	46	44	3	4	85
Beaver.	36	9	9	31	5	.....	26	3	4	7	17	.....	.....	40	10	7	4	80
Bedford.	23	1	6	12	4	.....	9	.....	4	6	12	.....	.....	17	13	.....	7	46
Berks.	51	6	15	32	8	.....	27	.....	4	6	35	.....	.....	45	40	23	18	130
Bucks.	26	3	6	24	4	.....	24	.....	5	4	29	.....	.....	31	40	4	6	66
Bradford.	59	7	17	23	4	.....	13	.....	6	6	40	.....	.....	20	41	8	6	78
Bucks.	54	4	8	31	11	.....	31	1	1	4	59	.....	.....	27	49	14	4	94
Fuiter.	31	4	6	17	5	.....	9	.....	2	4	9	.....	.....	13	29	4	14	52
Gambria.	42	5	39	52	11	.....	34	3	6	11	33	.....	.....	91	116	11	11	114
Carlton.	5	.....	1	1	.....	.....	1	.....	1	.....	4	.....	.....	3	6	.....	3	6
Carlton.	5	.....	1	1	.....	.....	45	1	2	9	16	.....	.....	33	56	3	3	66
Carlton.	12	6	21	27	13	.....	3	3	1	2	10	.....	.....	19	28	2	1	49
Carlton.	38	4	17	17	9	.....	35	.....	3	5	53	.....	.....	41	54	5	3	103
Chester.	71	4	12	28	9	.....	10	4	1	2	15	.....	.....	19	22	3	2	32
Clarion.	36	6	4	10	1	.....	36	2	5	1	31	.....	.....	13	23	3	5	38
Clearfield.	42	4	15	30	11	.....	3	3	5	1	17	.....	.....	17	26	1	6	38
Cleburn.	25	2	3	12	1	.....	2	.....	5	2	17	.....	.....	13	19	7	7	29
Columbia.	17	1	7	19	5	.....	9	.....	4	6	21	.....	.....	14	24	5	2	37
Crawford.	6	.....	6	26	3	.....	.....	.....	.....	.....	26	.....	.....	14	24	8	2	33
Cumberland.	38	1	11	28	8	.....	15	.....	3	2	19	.....	.....	26	20	.....	4	66
Cumberland.	38	3	11	11	6	.....	24	.....	2	1	18	.....	.....	28	33	6	4	83
Lebanon.	57	.....	14	32	5	.....	32	.....	4	5	48	.....	.....	28	62	9	3	88
Lebanon.	14	3	4	22	6	.....	17	4	.....	3	19	.....	.....	20	26	.....	1	30
Lebanon.	64	4	6	.....	2	.....	7	1	4	3	23	.....	.....	21	42	11	5	56

Fayette,	41	7	54	88	13	137	3	3	7	33	.....	.....	97	143	8	30	164
Forest,	26	.....	.....	5	1	1	.....	1	1	3	.....	.....	4	3	1	1	15
Franklin,	27	4	6	16	4	18	1	1	1	25	.....	.....	28	16	1	9	48
Fulton,	7	2	.....	4	.....	6	.....	.....	2	5	.....	.....	9	4	1	1	26
Greene,	8	2	6	12	.....	5	1	2	1	9	.....	.....	11	6	.....	.....	31
Huntingdon,	23	1	4	16	2	15	2	1	1	11	.....	.....	14	14	1	8	48
Indiana,	28	4	20	26	6	23	2	1	7	25	.....	.....	41	61	8	8	82
Jefferson,	31	6	16	21	4	27	3	3	7	23	.....	.....	29	78	5	2	62
Juniata,	20	.....	18	18	1	21	.....	.....	3	4	.....	.....	7	8	.....	3	17
Lackawanna,	43	16	30	74	18	97	.....	7	10	34	.....	.....	52	206	4	3	116
Lancaster,	99	3	23	24	18	29	1	4	3	40	.....	.....	42	31	9	3	174
Lawrence,	12	3	4	13	2	16	2	.....	3	10	.....	.....	13	41	4	6	35
Lebanon,	16	1	3	7	6	18	.....	1	5	20	.....	.....	19	17	2	5	54
Lehigh,	40	13	13	32	12	30	5	3	2	25	.....	.....	43	74	14	4	86
Luzerne,	100	27	71	170	52	170	5	14	11	85	.....	.....	158	243	9	29	218
Lycoming,	56	5	1	12	5	2	1	3	1	21	.....	.....	14	24	3	1	54
McKean,	17	2	1	17	3	6	2	.....	2	12	.....	.....	19	31	5	1	40
Mercer,	41	5	8	33	2	8	4	.....	7	25	.....	.....	21	22	5	4	63
Mifflin,	26	1	6	11	3	7	1	2	3	9	.....	.....	8	20	.....	.....	26
Monroe,	16	2	1	11	1	4	2	1	1	13	.....	.....	12	20	3	1	31
Montgomery,	94	9	21	42	12	47	2	5	9	66	.....	.....	39	75	13	4	155
Montour,	17	2	5	3	6	5	.....	2	3	5	.....	.....	4	7	2	3	45
Northampton,	50	7	18	37	4	36	.....	2	5	33	.....	.....	54	46	6	4	81
Northumberland,	41	5	10	37	12	25	.....	3	4	23	.....	.....	37	38	10	5	58
Perry,	26	1	3	11	4	3	.....	.....	1	16	.....	.....	6	9	3	2	30
Pike,	7	2	1	3	1	.....	.....	.....	2	9	.....	.....	5	11	.....	.....	8
Porter,	12	1	2	15	5	5	.....	.....	.....	10	.....	.....	9	42	4	6	40
Schuykill,	89	23	28	70	34	115	14	9	17	66	.....	.....	111	242	15	15	170
Snyder,	11	1	2	5	1	4	.....	.....	2	8	.....	.....	3	5	.....	5	20
Somerset,	26	5	12	33	5	55	3	3	3	24	.....	.....	38	113	9	16	102
Sullivan,	11	1	4	13	.....	3	.....	.....	.....	4	.....	.....	8	11	1	1	12
Susquehanna,	47	6	5	15	2	8	.....	3	.....	19	.....	.....	15	35	5	3	58
Tioga,	37	4	2	12	1	3	5	3	1	21	.....	.....	14	13	7	1	66
Union,	28	1	2	4	1	7	.....	.....	3	8	.....	.....	16	4	.....	2	26
Venango,	29	3	10	11	.....	7	.....	1	3	11	.....	.....	10	16	1	.....	52
Warren,	25	3	2	8	2	2	.....	1	2	12	.....	.....	12	17	5	3	85
Washington,	73	18	31	61	17	105	2	6	6	32	.....	.....	82	229	9	16	139
West Chester,	39	3	3	14	2	5	.....	3	2	17	.....	.....	6	11	3	4	34
Westmoreland,	58	16	43	70	14	174	7	5	13	45	.....	.....	121	231	13	93	180
Wyoming,	16	.....	.....	10	4	1	1	3	1	8	.....	.....	3	11	.....	1	29
York,	53	2	13	28	5	33	1	2	3	24	.....	.....	57	29	10	.....	102

28	Tuberculosis (total):	10,604	6,101	4,503	3,463	710	150	129	66	93	98	81	59
29	Tuberculosis of the lungs,	8,832	5,012	3,520	2,928	533	123	55	56	77	83	65	41
30	Acute miliary tuberculosis,	1,269	369	269	238	49	39	6	2	3	3	9	3
31	Tuberculous meningitis,	577	171	121	101	29	10	7	3	5	5	5	4
32	Abdominal tuberculosis,	413	231	179	221	45	5	8	3	3	6	1	4
33	Port's disease,	86	49	30	39	6	.....	1	.....	.....	.....	.....	.....
34	White swellings, other organs,	69	35	25	13	10	.....	2	1	1	1	3	1
35	Tuberculous of other organs,	171	95	76	49	14	2	1	1	.....	.....	.....	.....
36	Disseminated tuberculosis,	74	41	33	13	11	.....	.....	.....	.....	1	1	.....
37	Rickets,	69	49	20	21	13	3	.....	.....	.....	1	.....	1
38	Syphilis,	390	233	127	119	40	2	3	2	4	.....	6	3
39	Gonococcus infection,	20	11	9	3	1	1	.....	.....	.....	1	.....	.....
40	Cancer and other malignant tumors (total):	5,197	2,845	2,352	1,379	371	94	77	44	61	55	31	29
41	Cancer of the buccal cavity,	192	92	100	57	16	3	1	.....	.....	3	.....	.....
42	Cancer of the stomach, liver,	2,113	1,090	1,023	534	147	33	28	21	30	16	11	11
43	Cancer of the peritoneum, intestines, rectum,	678	400	278	211	110	13	13	9	13	9	9	5
44	Cancer of the female genital organs,	833	320	273	223	80	17	18	6	12	12	9	5
45	Cancer of the breast,	180	244	233	128	18	9	6	3	3	5	2	1
46	Cancer of the skin,	181	64	117	39	5	2	1	2	1	.....	2	1
47	Cancer of other organs or of organs not specified,	720	435	285	228	66	8	12	6	6	10	4	2
48	Other tumors (tumors of the female genital organs excepted),	36	21	15	8	4	2	.....	.....	.....	.....	.....	.....
49	Acute articular rheumatism,	463	238	225	102	33	13	5	5	2	5	1	3
50	Chronic rheumatism and gout,	106	48	58	25	3	.....	2	2	1	1	.....	.....
51	Scurvy,	13	12	1	3	5	1	1	.....	.....	.....	.....	.....
52	Diabetes,	1,036	602	434	282	51	33	33	10	14	11	6	12
53	Exophthalmic goitre,	67	32	35	9	6	2	.....	1	1	.....	1	.....
54	Adison's disease,	25	16	9	6	5	1	.....	1	.....	.....	.....	.....
55	Leucemia,	102	67	35	28	11	4	1	.....	.....	.....	.....	.....
56	Anamia, chlorosis,	328	164	164	93	24	8	3	7	3	3	1	1
57	Other general diseases,	137	58	79	45	9	3	1	3	1	.....	.....	.....
58	Alcoholism (acute or chronic),	277	157	120	57	39	4	5	1	2	4	.....	1
59	Chronic lead poisoning,	19	11	8	6	3	.....	.....	.....	.....	1	.....	.....
60	Other chronic acute poisonings,	1	.....	1	1	.....	.....	1	1	.....	.....	.....	.....
61	Other chronic poisonings,	20	8	12	3	.....	.....	.....	.....	1	.....	.....	.....
62	II.—DISEASES OF THE NERVOUS SYSTEM AND OF THE ORGANS OF SPECIAL SENSE,	11,664	4,882	6,182	1,965	594	167	214	89	95	106	58	70
63	Encephalitis,	115	69	55	19	9	2	5	1	.....	.....	4	1
64	Meningitis,	707	338	369	102	52	15	13	8	.....	2	2	2
65	Simple meningitis,	576	289	296	77	43	13	12	8	.....	6	.....	.....
66	Cerebrospinal meningitis (undefined),	169	43	66	15	9	2	1	.....	.....	.....	.....	.....
67	Cerebrospinal fever,	22	15	7	10	2	.....	.....	.....	1	.....	.....	.....

1 Cancer and other malignant tumors.

TABLE 5.—Continued.

International Number.	Cause of Death.	Total.	Cities.	Rural.	Philadelphia.	Pittsburgh.	Scranton.	Reading.	Wilkes-Barre.	Erie.	Harrisburg.	Johnstown.	Altoona.
62	Locomotor ataxia,	190	95	95	54	14	4	.....	1	5	3	.....	1
63	Other diseases of the spinal cord:	428	201	227	101	22	6	.....	6	4	3	.....	7
	Acute anterior poliomyelitis,	33	34	59	11	6	2	.....	1	.....	.....	.....	3
	Other diseases of the spinal cord ² ,	385	167	168	90	16	4	.....	5	4	3	.....	4
64	Cerebral hæmorrhage, apoplexy,	6,108	2,762	3,346	1,137	327	110	120	52	51	62	26	35
65	Softening of the brain,	128	56	72	18	5	3	2	1	5	.....	.....	.....
66	Paralysis without specified cause,	370	269	550	128	20	1	7	6	2	11	8	7
67	General paralysis of the insane,	491	217	274	105	20	1	7	3	10	2	2	3
68	Other forms of mental alienation,	197	64	133	27	8	2	1	.....	4	3	.....	.....
69	Epilepsy,	278	96	182	45	13	4	2	2	.....	.....	1	2
70	Convulsions (non-febrile),	35	12	23	.....	.....	.....	.....	5	.....	.....	1	.....
71	Convulsions of Infants,	1,062	423	639	38	50	8	45	1	2	12	11	12
72	Chorea,	20	8	12	.....	.....	.....	.....	.....	.....	.....	.....	.....
73	Neuralgia and neuritis,	50	28	22	17	2	1	2	1	.....	1	.....	.....
74	Other diseases of the nervous system,	280	158	122	72	25	8	6	2	2	1	1	.....
75	Diseases of the eyes and their annexa,	11	10	1	3	1	.....	1	1	.....	.....	.....	.....
76	Diseases of the ears,	154	94	60	37	25	2	1	.....	2	1	3	.....
III.—DISEASES OF THE CIRCULATORY SYSTEM,		12,989	6,990	5,999	3,750	778	183	152	97	141	136	58	87
77	Pericarditis, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
78	Acute endocarditis,	92	49	43	21	5	2	.....	1	.....	1	2	1
79	Chronic endocarditis,	487	343	144	221	31	20	1	12	3	7	3	5
80	Organic diseases of the heart,	10,187	5,392	4,795	2,892	641	125	125	68	112	106	42	60
81	Angina pectoris,	1,555	523	523	232	13	14	12	2	4	12	3	1
81	Diseases of the arteries, atheroma, aneurysm, etc., ..	1,398	808	590	458	61	17	9	4	18	7	8	10
82	Embolism and thrombosis, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
83	Diseases of the veins (varices, hæmorrhoids, phlebitis, etc.),	231	148	83	66	17	2	4	10	3	1	.....	7
84	Diseases of the lymphatic system (lymphangitis, etc.), ..	45	31	14	13	6	3	.....	.....	.....	1	.....	.....
85	Hæmorrhage; other diseases of the circulatory system, ..	34	18	16	10	3	.....	.....	.....	1	.....	.....	3
		44	17	27	4	1	.....	1	.....	.....	.....	.....	.....

IV.—DISEASES OF THE RESPIRATORY SYSTEM.									
	14,210	7,723	6,487	3,274	1,446	340	111	150	109
86 Diseases of the nasal fossae,	30	8	22	3	3	1	3	1	1
87 Diseases of the larynx,	160	59	110	17	9	2	3	1	1
88 Diseases of the thyroid body,	35	16	19	6	3	1	10	13	7
89 Acute bronchitis,	1,054	614	440	274	129	30	10	11	4
90 Chronic bronchitis,	613	329	284	140	68	18	9	11	4
91 Bronchopneumonia,	4,143	2,491	1,712	1,091	528	115	27	43	34
92 Pneumonia:	2,524	2,242	2,242	1,421	596	152	48	57	50
Lobar pneumonia,	2,343	2,093	2,153	1,421	547	140	45	54	54
Pneumonia (undefined),	3,573	1,481	2,092	598	49	12	36	20	34
93 Pleurisy,	331	213	121	116	34	6	6	8	2
94 Pulmonary congestion, pulmonary apoplexy,	468	244	224	129	34	9	3	1	2
95 Gangrene of the lung,	22	12	10	7	3	3	2	5	1
96 Empyema,	278	119	159	42	27	3	2	5	1
97 Pulmonary emphysema,	19	8	11	4	.....	1	1	.....	.....
98 Other diseases of the respiratory system (tuberculosis excepted),	225	96	130	24	12	4	2	3	2
V.—DISEASES OF THE DIGESTIVE SYSTEM,	15,168	8,150	7,018	3,296	1,302	404	192	179	175
99 Diseases of the mouth and annexa,	57	25	32	10	4	1	.....	1	1
100 Diseases of the oesophagus,	118	55	63	20	6	1	2	1	1
101 Stomach,	20	7	13	4	1	.....	4	7	2
102 Other diseases of the stomach (cancer excepted),	536	150	86	70	21	3	22	6	25
103	1,625	687	928	204	112	47	22	6	14
104 Diarrhoea and enteritis (under 2 years),	8,156	4,428	3,728	1,864	707	231	93	91	86
105 Diarrhoea and enteritis (2 years and over),	1,105	560	545	235	80	24	12	14	6
106 Ankylostomiasis, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....
107 Intestinal parasites,	61	2	9	1	.....	.....	12	22	13
108 Appendicitis and typhilitis,	114	492	192	199	73	19	12	22	8
109 Hernia, intestinal obstruction:	855	504	351	218	57	22	18	13	12
Intestinal obstruction,	187	93	140	140	10	8	9	5	3
Intestinal obstruction (nonperforated),	574	317	257	128	38	11	9	8	7
110 Other diseases of the intestines,	216	112	104	33	24	6	1	2	3
111 Acute yellow atrophy of the liver,	34	15	29	5	5	.....	.....	.....	1
112 Hydatid tumor of the liver,	1	1	.....	.....	.....	.....	.....	.....	.....
113 Cirrhosis of the liver,	1,070	620	450	264	131	24	14	9	19
114 Biliary calculi,	298	130	78	56	23	16	1	3	1
115 Other diseases of the liver,	402	183	219	62	33	7	10	5	2
116 Diseases of the spleen,	14	9	5	3	2	.....	2	5	3
117 Simple peritonitis (nonperforated),	276	117	159	23	18	2	2	5	3
118 Other diseases of the digestive system (cancer and tuberculosis excepted),	70	43	27	25	4	1	1	1	.....

* Exclusive of acute anterior poliomyelitis (infantile paralysis).

VIII.—DISEASES OF THE SKIN AND OF THE CELLULAR TISSUE.		472	143	297	90	19	4	4	2	4	2	5	2
142	Gangrene,	261	100	161	37	11	2	4	1	3	2	1	2
143	Furuncle,	44	25	19	14	2	2	.....	.....	.....	.....	.....	.....
144	Acute abscess,	85	41	44	22	5	.....	.....	.....	.....	.....	.....	.....
145	Other diseases of the skin and anexa,	82	27	55	17	1	.....	.....	.....	.....	.....	.....	.....
IX.—DISEASES OF THE BONES AND OF THE ORGANS OF LOCOMOTION.		176	121	55	43	21	4	.....	3	2	6	3	1
146	Diseases of the bones (tuberculosis excepted),	155	108	47	39	20	4	.....	3	2	6	2	1
147	Diseases of the joints (tuberculosis and rheumatism excepted),	16	11	5	3	1	.....	.....	.....	.....	.....	.....	.....
148	Amputations, .....	.....	2	3	1	.....	.....	.....	.....	.....	.....	.....	.....
149	Other diseases of the organs of locomotion,	5	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
X.—MALFORMATIONS.		1,315	584	761	259	87	4	16	6	10	10	8	7
150	Congenital malformations (stillbirths not included), ..	1,345	584	761	259	87	4	16	6	10	10	8	7
	Hydrocephalus,	111	49	62	19	12	.....	.....	.....	.....	.....	.....	.....
	Congenital malformations of the heart,	881	392	489	173	56	2	14	3	7	8	5	7
	Other congenital malformations,	353	143	210	67	19	2	2	3	1	1	2	.....
XI.—EARLY INFANCY.		6,946	3,325	3,621	1,226	555	43	73	71	58	63	77	46
151	Congenital debility, icterus and sclerema,	5,912	2,820	3,122	1,015	461	38	66	57	51	60	62	48
	Premature birth,	3,307	1,660	1,737	630	310	14	38	31	48	26	27	17
	Congenital debility, "atrophy," "marasmus," etc., ..	2,545	1,160	1,385	385	151	24	28	26	3	34	35	26
152	Other causes peculiar to early infancy,	979	502	477	211	93	5	7	14	7	3	15	3
	Injuries at birth,	552	284	268	10	53	2	1	6	6	2	7	1
	Other causes peculiar to early infancy ^a ,	427	218	269	101	40	3	6	8	1	1	8	2
153	Lack of care,	25	3	22	.....	1	.....	.....	.....	.....	.....	.....	.....
XII.—OLD AGE.		1,407	482	925	217	47	2	10	11	2	14	17	13
154	Senility,	1,407	482	925	217	47	2	10	11	2	14	17	13
XIII.—EXTERNAL CAUSES.		9,351	4,537	4,814	1,685	681	248	113	146	67	89	77	46
155	Suicide (total),	1,033	582	451	275	103	12	28	3	8	12	4	3
	Suicide by poison,	311	-206	105	86	47	6	14	1	3	4	1	2
156	Suicide by asphyxia,	107	96	11	81	2	1	2	.....	.....	.....	.....	.....
157	Suicide by hanging or strangulation,	178	58	120	20	12	.....	1	1	2	5	.....	.....
158	Suicide by drowning,	42	23	19	9	3	.....	5	.....	.....	.....	.....	.....

^a Exclusive of injuries at birth.

TABLE 5. —Continued.

International Number.	Cause of Death.	Total.	Cities.	Rural.	Philadelphia.	Pittsburgh.	Scranton.	Reading.	Wilkes-Barre.	Erie.	Harrisburg.	Johnstown.	Altoona.
150	Suicide by firearms.	390	146	154	60	20	4	4	1	2	1	3	1
151	Suicide by cutting or piercing instruments.	68	37	31	14	12	1	1	1	1	1	1	1
152	Suicide by jumping from high places.	13	10	3	3	6	1	1	1	1	1	1	1
153	Suicide by crushing.	8	3	5	1	1	1	1	1	1	1	1	1
154	Other suicides.	6	3	3	1	1	1	1	1	1	1	1	1
155	Accidental or undefined (total).	7,971	3,770	4,201	1,344	549	231	76	140	54	71	71	42
156	Poisoning by food.	34	25	9	2	1	1	1	1	2	1	1	1
157	Other acute poisonings.	172	76	96	81	13	3	3	1	1	1	1	1
158	Conflagration.	96	35	61	8	5	3	1	1	1	1	1	1
159	Burns (conflagration excepted).	784	433	351	176	64	25	10	13	8	4	6	1
160	Absorption of deleterious gases (conflagration excepted).	291	150	81	102	6	5	7	3	3	3	1	2
161	Accidental drowning.	231	121	110	45	34	4	2	6	1	1	1	1
162	Traumatism by firearms.	188	111	77	112	9	1	2	9	1	1	1	1
163	Traumatism by cutting or piercing instruments.	146	113	33	7	1	1	1	1	1	1	1	1
164	Traumatism by fall.	1,287	731	556	308	118	26	18	14	9	21	5	6
165	Traumatism in mines and quarries.	1,393	432	961	1	44	87	1	49	1	17	17	4
166	Traumatism in mines.	1,341	431	920	1	44	87	1	49	1	17	17	4
167	Traumatism by machines.	212	121	91	33	26	2	6	1	4	5	1	1
168	Traumatism by other crushing.	1,994	1,004	994	288	150	57	17	43	19	27	23	19
169	Railroad accidents and injuries.	1,365	590	775	188	88	47	11	25	11	17	16	13
170	Street-car accidents and injuries.	1,228	164	64	74	32	2	3	6	2	3	2	5
171	Automobile accidents and injuries.	142	101	41	40	14	2	2	7	2	6	4	1
172	Injuries by other vehicles.	234	136	98	76	14	6	1	1	4	1	1	1
173	Landslide, other crushing.	29	13	16	5	2	1	1	1	1	1	1	1
174	Injuries by animals.	45	17	28	6	3	1	1	1	1	1	1	1
175	Struck by.	11	3	8	2	1	1	1	1	1	1	1	1
176	Excessive cold.	10	10	10	10	10	10	10	10	10	10	10	10
177	Effects of heat.	433	293	140	184	38	8	6	2	3	6	1	2
178	Lightning.	40	5	35	1	1	1	1	1	1	1	1	1
179	Electricity (lightning excepted).	70	40	30	15	2	2	2	1	2	1	1	3
180	Fractures (cause not specified).	9	8	1	4	1	1	1	1	1	1	1	1
181	Other external violence.	326	142	184	50	35	5	1	1	3	1	6	1

182	Homicide (total), ⁴	347	185	162	66	29	5	9	3	5	6	2	1
183	Homicide by firearms,	180	94	86	29	15	4	6	2	5	8	2	1
184	Homicide by cutting or piercing instruments,	69	32	28	9	4	.....	1	1	.....	1	.....	.....
184	Homicide by other means,	107	59	48	28	10	1	2	.....	.....	2	.....	.....
	XIV.—ILL DEFINED DISEASES,	1,081	300	781	47	18	3	31	11	1	7	10	1
187	Ill defined organic disease,	90	24	66	9	.....	1	3	.....	.....	2	2	.....
188	Sudden death	95	8	87	1	.....	.....	.....	.....	.....	.....	.....	.....
189	Not specified or ill-defined,	896	268	628	44	18	.....	.....	11	.....	.....	.....	.....
	Ill defined,	748	235	513	42	18	.....	.....	8	.....	5	8	1
	Not specified or unknown,	143	33	110	2	.....	.....	.....	3	.....	5	6	1

⁴ Order of title under this head changed.

Tuberculosis (total):												
28	Tuberculosis of the lungs,	78	71	69	48	90	36	43	38	63	17	19
29	Acute miliary tuberculosis,	62	53	51	36	76	20	33	29	57	17	16
30	Tuberculous meningitis,	1	4	3	4	7	...	...	...	1	...	...
31	Abdominal tuberculosis,	6	6	3	3	2	...	3	3	2	...	1
32	Pott's swellings,	5	3	3	3	1	3	...	...	1	...	...
33	White swellings,	1	1	1	2	1	...	3	1	...	...	...
34	Tuberculosis of other organs,	1	2	...	...	...	...	1	3	...	...	1
35	Disseminated tuberculosis,	2	1	3	...	2	1	1	...	...	...	...
36	Rickets,	1	...	...	...	1	1	...	...	2	...	1
37	Syphilis,	5	2	5	2	2	3	5	...	1	...	...
38	Gonococcus infection,	1	...	...	...	...	...	...	...	...	...	...
Cancer and other malignant tumors (total):												
39	Cancer of the buccal cavity,	38	44	42	27	28	28	27	29	25	8	20
40	Cancer of the stomach, liver, .....	...	2	...	...	7	8	6	10	10	3	5
41	Cancer of the peritoneum, intestines, rectum,	16	11	15	9	4	3	6	7	...	1	1
42	Cancer of the female genital organs,	6	6	4	6	7	9	5	9	2	1	5
43	Cancer of the breast,	2	7	3	3	4	4	3	1	1	...	6
44	Cancer of the skin,	1	1	2	1	1	2	...	...	...	1	...
45	Cancer of other organs or of organs not specified,	7	9	5	4	4	2	7	2	5	...	3
Other tumors (tumors of the female genital organs excepted),												
46	Acute articular rheumatism,	3	...	...	1	...	...	...	...	...	2	...
47	Chronic rheumatism and gout,	9	3	4	4	...	4	2	4	4	3	1
48	Neurvy,	1	...	1	...	...	1	1	1	...	1	2
49	Diabetes,	13	3	13	5	6	4	5	6	4	...	3
50	Exophthalmic goitre, .....	...	...	1	1	1	...	4	...	...	...	...
51	Addison's disease, .....	...	...	1	...	1	...	...	...	...	...	...
52	Leucæmia, .....	...	...	2	...	...	1	2	3	1	...	5
53	Anæmia, chlorosis,	1	...	1	2	...	...	1	...	3	...	...
54	Other general diseases, .....	...	...	...	...	...	...	...	...	...	...	...
55	Alcoholism (acute or chronic),	2	3	1	2	1	1	3	...	1	...	3
56	Chronic lead poisoning, .....	...	...	...	...	...	...	...	...	...	...	...
57	Other chronic occupation poisonings, .....	...	...	...	...	...	...	...	...	...	...	...
58	Other chronic poisonings, .....	...	...	...	...	...	...	...	...	...	...	...
59	Other chronic poisonings, .....	...	...	...	...	...	...	...	...	...	...	...
II.—DISEASES OF THE NERVOUS SYSTEM AND OF THE ORGANS OF SPECIAL SENSE,												
60	Encephalitis,	111	91	76	46	41	50	60	67	92	38	27
61	Meningitis, .....	...	...	...	...	...	...	...	...	...	...	...
62	Simple meningitis,	9	8	4	3	3	1	2	3	7	1	1
63	Cerebrospinal fever,	8	7	3	2	3	5	2	3	7	5	1
64	Cerebrospinal meningitis (undefined),	1	1	1	2	...	1	2	...	...	...	...

1. Cancer and other malignant tumors.

IV.—DISEASES OF THE RESPIRATORY SYSTEM.									
	72	52	50	104	87	65	67	55	83
86 Diseases of the nasal fossae, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....
87 Diseases of the larynx, .....	.....	.....	3	.....	1	2	1	.....	1
88 Diseases of the thyroid body, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....
89 Acute bronchitis,	2	3	1	12	8	6	4	3	8
.....	4	5	11	2	1	.....	.....	4	10
91 Bronchopneumonia,	13	10	19	98	26	5	13	11	45
92 Pneumonia:	47	30	34	57	46	49	40	33	29
Lobar pneumonia,	17	20	24	38	18	6	18	11	24
Pneumonia (interlobar),	32	3	5	29	28	43	22	23	16
93 Pleurisy,	3	2	.....	1	.....	1	1	2	6
94 Pulmonary congestion, pulmonary apoplexy, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....
95 Gangrene of the lung,	1	1	1	3	2	.....	.....	3	2
96 Asthma, .....	.....	.....	.....	.....	1	2	.....	.....	.....
97 Pulmonary emphysema, .....	.....	.....	.....	1	.....	.....	.....	.....	.....
98 Other diseases of the respiratory system (tuberculosis), .....	.....	.....	.....	.....	2	.....	2	.....	1
.....
V.—DISEASES OF THE DIGESTIVE SYSTEM.	105	72	94	117	89	72	52	42	48
99 Diseases of the mouth and annexa, .....	.....	.....	1	.....	.....	1	.....	.....	.....
100 Diseases of the pharynx,	2	.....	.....	.....	.....	.....	.....	1	.....
101 Diseases of the esophagus, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....
102 Ulcers of the stomach,	2	.....	2	3	1	1	.....	1	1
103 Other diseases of the stomach (cancer excepted),	4	15	15	7	19	12	7	4	4
104 Diarrhoea and enteritis (under 2 years),	60	24	37	58	47	18	17	18	17
105 Diarrhoea and enteritis (2 years and over),	6	9	17	9	6	5	3	3	4
106 Ankylostomiasis, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....
107 Intestinal parasites, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....
108 Appendicitis and typhlitis,	9	3	4	6	4	9	9	9	5
109 Hernia,	6	6	5	15	3	8	6	3	4
Intestinal obstruction, .....	.....	1	.....	4	.....	1	1	.....	.....
Other diseases of the intestines,	6	5	5	11	3	7	1	3	3
110 ..... .....	.....	.....	1	.....	.....	3	3	1	1
111 Acute yellow atrophy of the liver, .....	.....	.....	.....	.....	.....	1	.....	.....	.....
112 Hydatid disease of the liver, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....
113 Cirrhosis of the liver,	7	3	8	7	4	2	4	2	4
114 Biliary calculi,	3	3	2	4	.....	4	.....	.....	.....
115 Other diseases of the liver,	3	3	1	3	1	2	.....	.....	3
116 Diseases of the spleen,	1	.....	.....	.....	.....	.....	.....	.....	1
117 Simple peritonitis (nonpurulent),	2	4	1	5	2	3	1	.....	4
118 Other diseases of the digestive system (cancer and tuberculosis excepted), .....	.....	.....	.....	.....	2	1	.....	.....	.....

2 Exclusive of acute anterior poliomyelitis, (infantile paralysis.)

VIII.—DISEASES OF THE SKIN AND OF THE CELLULAR TISSUE.		2	2	1	2	2	1	2	1	2	4	1	4	4
142	Gangrene,	1	1	1	2	2	2	1	1	2	4	1	4	4
143	Furuncle,	1	1	1	2	1	1	1	1	2	3	1	2	4
144	Acute abscess,	1	1	1	1	1	1	1	1	1	1	1	2	2
145	Other diseases of the skin and anexa,	1	1	1	1	1	1	1	1	1	1	1	1	1
IX.—DISEASES OF THE BONES AND OF THE ORGANS OF LOCOMOTION.		3	2	1	3	2	2	3	3	1	1	1	1	2
146	Diseases of the bones (tuberculosis excepted),	3	2	1	1	1	2	2	2	1	1	1	1	2
147	Diseases of the joints (tuberculosis and rheumatism excepted),	3	2	1	2	2	2	1	1	1	1	1	1	2
148	Amputations,	1	1	1	1	1	1	1	1	1	1	1	1	1
149	Other diseases of the organs of locomotion,	1	1	1	1	1	1	1	1	1	1	1	1	1
X.—MALFORMATIONS.		17	5	14	2	8	3	3	3	3	5	6	4	6
150	Congenital malformations (stillbirths not included),	17	5	14	2	8	3	3	3	3	5	6	4	6
	Hydrocephalus,	1	1	1	1	1	1	1	1	1	1	1	1	1
	Congenital malformations of the heart,	13	5	12	2	6	2	2	2	2	2	4	3	3
	Other congenital malformations,	3	3	1	1	1	1	1	1	1	3	1	1	3
XI.—EARLY INFANCY.		67	35	34	58	44	43	24	43	24	23	18	50	22
151	Congenital debility, icterus and sclerema,	61	31	32	47	38	37	21	37	21	22	15	40	19
	Premature birth,	22	15	28	28	15	22	11	22	11	12	8	19	12
	Congenital debility, "atrophy," "marasmus," etc.,	39	16	4	19	23	15	10	15	10	10	7	21	7
152	Other causes peculiar to early infancy,	6	4	2	11	6	6	3	6	3	1	3	9	3
	Injuries at birth,	2	3	2	5	4	5	3	5	3	1	1	9	3
153	Other causes peculiar to early infancy ^a ,	4	1	3	6	2	1	1	1	1	1	2	1	1
	Lack of care,	1	1	1	1	1	1	1	1	1	1	1	1	1
XII.—OLD AGE.		11	5	1	3	3	5	9	5	9	4	3	2	2
154	Senility,	11	5	1	3	3	5	9	5	9	4	3	2	2
XIII.—EXTERNAL CAUSES.		48	43	38	79	41	39	39	39	39	61	37	57	36
155	Suicide (total),	3	6	4	10	5	5	3	5	3	12	2	3	2
156	Suicide by poison,	1	2	1	6	1	2	1	2	1	2	1	1	1
157	Suicide by asphyxia,	1	1	1	2	1	1	1	1	1	1	1	1	1
	Suicide by hanging or strangulation,	1	1	1	1	1	1	1	1	1	1	1	1	1

^a Exclusive of injuries at birth.

TABLE 5. —Continued.

International Number.	Cause of Death.	Allentown.	Lancaster.	York.	McKeesport.	Chester.	New Castle.	Williamsport.	Easton.	Norristown.	Shenandoah.	Hazleton.
158	Suicide by drowning,	1	2	1	1	1	2	1	4	2	1	2
159	Suicide by firearms,	1	1	1	1	1	1	2	2	1	1	1
160	Suicide by cutting or piercing instruments,	1	1	1	1	1	1	1	1	1	1	1
161	Suicide by jumping from high places,	1	1	1	1	1	1	1	1	1	1	1
162	Suicide by crushing,	1	1	1	1	1	1	1	1	1	1	1
163	Other suicides,	1	1	1	1	1	1	1	1	1	1	1
164	Accidental or undefined (total),	42	35	33	67	35	31	36	48	31	52	32
165	Poisoning by food,	1	1	2	1	1	2	1	1	1	1	1
166	Other acute poisonings,	1	1	1	1	1	1	1	1	1	1	1
167	Conflagration,	1	1	1	1	1	1	1	1	1	1	1
168	Burns (conflagration excepted),	5	2	5	9	9	5	2	4	2	4	4
169	Absorption of deleterious gases (conflagration excepted),	1	1	1	1	1	1	1	1	1	1	1
170	Accidental drowning,	2	4	1	4	3	1	1	1	1	1	1
171	Traumatism by firearms,	1	1	1	1	1	1	1	1	1	1	1
172	Traumatism by falling or piercing instruments,	7	12	16	7	2	7	11	12	13	6	10
173	Traumatism by fall,	2	1	1	16	1	1	1	1	2	29	9
174	Traumatism in mines and quarries,	1	1	1	1	1	1	1	1	2	29	9
175	Traumatism in quarries,	1	1	1	4	3	4	1	1	2	1	1
176	Traumatism by machines,	13	10	7	22	15	11	14	18	9	7	6
177	Traumatism by other crushing,	6	4	2	19	9	9	10	11	2	5	4
178	Railroad accidents and injuries,	3	1	1	2	2	2	1	4	2	1	1
179	Street-car accidents and injuries,	2	1	4	1	2	1	1	2	2	1	1
180	Automobile accidents and injuries,	2	4	1	1	1	1	2	1	2	1	1
181	Injuries by other vehicles,	2	4	1	1	1	1	2	1	2	1	1
182	Landslide, other crushing,	1	1	1	1	1	1	1	1	1	1	1
183	Injuries by animals,	1	1	1	1	1	1	1	1	1	1	1
184	Starvation,	1	1	1	1	1	1	1	1	1	1	1
185	Excessive cold,	1	1	1	1	1	1	1	1	1	1	1
186	Effects of heat,	1	1	1	1	1	1	1	1	1	1	1
187	Lightning,	1	1	1	1	1	1	1	1	1	1	1
188	Electricity,	1	1	1	1	1	1	1	1	1	1	1
189	Fractures (cause not specified),	5	1	1	1	1	1	2	1	1	1	1
190	Other external violence,	1	1	1	1	1	1	2	2	1	1	1

TRUCKAL:

MALES:

[illegible]

FEMALES:

TABLE 6.—Continued.

CITIES.		Age.													
Sex, Color, and Nativity.		40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80-84	85-89	90-94	95-99	100+	Unk.
MALES:															
1. Total.	1,613	1,735	1,878	1,737	1,825	1,826	1,554	1,136	687	343	93	17	1	3	
2. White.	1,483	1,612	1,788	1,659	1,765	1,772	1,513	1,117	675	338	90	15	1	3	
3. Native.	851	893	1,030	974	1,079	1,066	791	619	355	194	51	9	1	1	
4. Both parents native.	374	384	476	401	568	576	489	380	224	126	27	7	1	1	
5. One or both parents foreign.	379	403	418	347	245	277	135	102	39	30	9	2	1	1	
6. Parentage unknown.	98	106	136	136	166	163	167	137	92	38	15	1	1	1	
7. Foreign.	686	677	709	657	754	777	704	488	316	144	39	6	1	2	
8. Unknown.	46	42	49	28	32	29	18	10	4	5	3	2	1	1	
9. Colored.	130	123	90	78	60	64	41	19	12	5	3	2	1	1	
10. Negro.	135	119	82	73	60	64	41	19	12	5	3	2	1	1	
11. Indian.	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
12. Chinese.	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
13. Japanese.	4	4	8	5	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
FEMALES:															
1. Total.	1,061	1,126	1,235	1,346	1,516	1,704	1,638	1,417	1,029	547	198	44	9	1	
2. White.	983	1,048	1,150	1,271	1,450	1,663	1,594	1,399	1,009	533	189	41	5	1	
3. Native.	603	650	788	816	895	969	842	801	546	308	110	23	3	1	
4. Both parents native.	335	322	409	445	467	543	539	552	374	218	67	16	1	1	
5. One or both parents foreign.	269	284	294	278	243	227	166	127	91	45	22	2	1	1	
6. Parentage unknown.	59	64	85	93	95	139	137	122	100	45	21	5	1	1	
7. Foreign.	325	338	440	470	645	742	747	591	453	220	79	18	2	2	
8. Unknown.	5	10	12	5	10	12	5	7	6	5	5	3	4	4	
9. Colored.	68	78	86	55	56	41	44	18	20	14	9	3	4	4	
10. Negro.	68	78	86	55	56	41	43	18	20	14	9	3	4	4	
11. Indian.	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
12. Chinese.	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
13. Japanese.	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....

RURAL:

MALES:

[illegible]

FEMALES:

1. Total	679	697	898	965	1,245	1,593	1,818	1,691	1,325	762	267	61	10	8
2. White	569	578	831	891	1,234	1,576	1,803	1,683	1,318	760	291	58	8	8
3. Native	524	534	793	843	1,234	1,576	1,803	1,683	1,318	760	291	58	8	8
4. Both parents native	493	503	763	813	1,203	1,546	1,773	1,653	1,288	729	273	53	6	6
5. One or both parents foreign	114	184	128	128	128	128	128	128	128	128	128	36	2	2
6. Parentage unknown	318	318	184	184	184	184	184	184	184	184	184	11	1	1
7. Foreign	58	59	84	84	146	184	202	204	204	113	47	11	3	3
8. Unknown	121	154	156	172	223	227	322	294	233	127	47	5	2	2
9. Colored	5	3	6	4	6	7	32	29	19	3	6	3	6	6
10. Negro	19	19	17	12	11	17	15	8	7	2	6	3	2	2
11. Indian	10	10	11	11	11	17	15	8	7	2	6	3	2	2
12. Chinese	..	..	..	..	..	..	..	..	..	..	..	..	..	..
13. Japanese	..	..	..	..	..	..	..	..	..	..	..	..	..	..

MORTALITY TABLE 7.

Deaths by color, nativity and parent nativity for the entire State for certain municipalities having more than 10,000 population, and for the rural sections of each county including all municipalities having less than 10,000 population. (Stillbirths excluded.)

Area.	Total.	White.	Native.	Both parents native.	Both parents foreign.	Both parents unknown.	Native and foreign parents.	Native and unknown parents.	Foreign and unknown	Foreign.	Unknown.	Colored.	Negro.	Chinese.	Japanese.	Indian.	Other colored.
Total cities,	57,909	54,769	39,846	20,029	12,757	1,990	3,431	1,213	426	14,415	508	3,140	3,105	29	2	4	.....
Albion,	824	822	730	552	133	6	17	19	3	91	1	7	2	.....	.....	.....	.....
Altoona,	621	614	525	359	95	14	35	17	5	88	1	7	7	.....	.....	.....	.....
Beaver Falls,	166	165	125	72	32	9	4	7	1	37	3	1	1	.....	.....	.....	.....
Bethlehem,	181	177	163	137	15	3	5	2	1	14	.....	4	4	.....	.....	.....	.....
Braddock,	352	339	252	61	169	3	14	2	3	85	2	13	13	.....	.....	.....	.....
Bradford,	212	209	159	91	28	15	10	13	2	48	2	3	3	.....	.....	.....	.....
Butler,	241	239	204	126	49	5	18	4	2	34	1	2	2	.....	.....	.....	.....
Carbondale,	294	294	183	90	56	4	29	9	2	109	2	.....	.....	.....	.....	.....	.....
Carlisle,	171	143	185	117	2	3	4	2	.....	7	1	28	25	.....	.....	3	.....
Carnegie,	92	88	72	27	40	1	1	3	.....	16	.....	4	4	.....	.....	.....	.....
Chambersburg,	195	182	171	135	6	14	4	9	3	8	.....	13	13	.....	.....	.....	.....
Chester,	603	611	410	235	103	15	47	19	9	96	5	92	92	.....	.....	.....	.....
Coatesville,	127	124	93	50	18	3	4	1	1	11	.....	23	23	.....	.....	.....	.....
Cumru,	134	128	108	60	20	8	4	4	.....	14	1	11	11	.....	.....	.....	.....
Connellsville,	189	179	131	87	27	2	10	.....	1	44	4	10	10	.....	.....	.....	.....
DuBois,	133	131	101	57	24	5	12	2	.....	28	.....	9	2	.....	.....	.....	.....
Duquesne,	319	317	225	45	99	41	23	15	.....	91	1	8	8	.....	.....	.....	.....
Easton,	181	173	149	36	91	5	14	1	2	24	.....	8	8	.....	.....	.....	.....
.....	486	480	395	240	59	9	21	12	4	.....	.....	6	6	.....	.....	.....	.....
Erie,	1,102	1,061	768	312	264	73	96	15	8	309	14	11	11	.....	.....	.....	.....

Greensburg,	294	123	86	14	10	6	1	77	4	88	.....
Harrisburg,	498	643	643	64	27	46	3	86	5	88	.....
Hazleton,	337	337	216	85	96	29	3	120	1	.....	.....
Johnstown,	330	314	179	46	112	3	3	34	1	16	.....
Johnstown,	830	816	610	272	238	16	53	292	4	14	.....
Lancaster,	694	677	585	486	41	28	20	91	1	17	.....
Lebanon,	307	305	281	238	15	12	5	19	5	2	.....
McKees Rocks,	165	164	131	28	90	1	7	30	3	1	.....
McKeesport,	634	609	401	167	179	7	41	3	202	6	.....
Mahanoy City,	278	277	211	65	126	4	7	65	1	1	.....
Meadville,	169	148	99	24	7	12	5	19	2	5	.....
Monessen,	139	108	17	82	1	6	1	28	1	2	.....
Mount Carmel,	191	135	50	43	8	21	4	56	.....	.....	.....
Nanticoke,	286	173	26	115	4	26	.....	113	.....	.....	.....
Newcastle,	534	521	408	238	122	15	34	107	6	13	.....
Norristown,	634	665	459	279	99	30	25	4	125	21	.....
North Braddock,	212	213	105	42	50	2	7	40	2	2	.....
North Fayette,	212	213	163	106	36	10	5	48	2	2	.....
Philadelphia,	167	167	101	15	71	15	.....	66	.....	.....	.....
Phoenixville,	36,276	24,251	16,875	7,860	5,492	1,221	1,688	7,131	245	2,005	17
Pittsburgh,	192	188	154	95	14	1	10	34	.....	4	.....
Pittsburgh,	8,060	7,656	5,240	2,079	2,122	168	602	2,323	63	413	432
Pittsburgh,	280	280	169	49	98	2	18	2	109	2	.....
Plymouth,	252	252	172	44	106	1	18	1	79	1	.....
Pottstown,	211	209	193	164	16	3	2	13	3	2	.....
Pottsville,	337	384	303	191	65	33	6	78	3	3	.....
Reading,	1,408	1,393	1,243	1,019	162	10	39	147	3	15	.....
Seranton,	1,354	1,192	410	624	20	108	22	747	22	13	.....
Shamokin,	251	249	217	146	41	.....	.....	31	1	2	.....
Sharon,	130	189	144	67	42	8	18	4	1	1	.....
Shenandoah,	506	375	71	257	9	26	5	7	130	1	.....
South Bethlehem,	308	307	236	17	10	2	.....	2	1	.....	.....
South Sharton,	183	183	161	56	4	.....	.....	30	1	1	.....
Stroud,	178	178	76	56	4	.....	.....	31	10	10	.....
Sunbury,	181	176	143	4	14	6	8	4	1	.....	.....
Uniontown,	217	190	130	85	23	12	3	54	6	27	.....
Warren,	102	102	82	36	18	10	12	18	1	.....	.....
Washington,	290	296	270	57	5	13	10	30	2	24	.....
West Chester,	237	192	170	122	22	5	8	18	4	45	.....
Wilkes-Barre,	1,072	1,069	671	260	272	19	72	375	13	13	.....
Wilkesburg,	222	240	189	122	30	11	10	5	1	12	.....
Williamsport,	519	496	428	296	38	34	28	65	3	23	.....
York,	659	641	598	510	28	17	20	42	1	18	.....

MORTALITY TABLE 8.

Deaths (exclusive of stillbirths) in each city having 100,000 population or over in 1910, from certain causes, by age.

CAUSE OF DEATH.		Age.								
Abridged Inter- national Number.		All ages.	Under 1.	1.	2.	3.	4.	5 to 9.	10 to 19.	20 to 29.
	All Causes,	26,276	4,769	1,151	530	327	273	592	832	1,954
1	Typhoid fever,	230	.....	5	1	1	8	11	37	75
2	Typhus fever,	11	2	.....	1	.....	.....	1	.....	.....
3	Malaria, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4	Smallpox,	2	.....	.....	.....	.....	.....	.....	.....	.....
5	Measles,	289	65	99	53	23	21	16	6	4
6	Scarlet fever,	185	7	21	30	29	27	43	14	11
7	Whooping cough,	109	46	37	10	13	3	.....	.....	.....
8	Diphtheria and croup,	491	28	95	94	73	68	107	13	10
9	Influenza,	183	8	4	3	.....	.....	6	2	7
10	Asiatic cholera, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....
11	Cholera nostras, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....
12	Other epidemic diseases,	82	28	1	.....	.....	.....	.....	.....	.....
13	Tuberculosis of the lungs,	3,058	38	4	.....	.....	.....	.....	.....	.....
14	Tuberculous meningitis,	221	50	14	11	17	2	23	215	742
15	Other forms of tuberculosis,	1,374	16	11	2	5	16	30	16	12
16	Cancer and other malignant tumors,	1,379	1	2	.....	4	5	18	6	26
17	Acromegaly,	102	28	14	10	6	7	8	4	5
18	Cerebral hemorrhage and softening,	1,155	18	3	.....	1	1	2	3	10
19	Organic diseases of the heart,	2,862	44	6	.....	2	4	42	100	115
20	Acute bronchitis,	274	158	40	11	6	4	9	.....	1
21	Chronic bronchitis,	1,421	8	1	.....	.....	.....	.....	.....	6
22	Pneumonia,	1,421	180	122	46	26	10	33	44	102
23a	Bronchopneumonia,	1,091	435	221	70	37	23	28	16	27
23b	Other diseases of the respiratory system,	348	47	5	19	10	2	6	9	25
24	Diseases of the stomach,	274	57	5	5	1	1	10	5	13
25	Diarrhoea and enteritis,	1,598	206	266	38	15	17	12	5	13
26	Appendicitis and typhlitis,	199	1	1	1	3	.....	15	35	45
27	Hernia, intestinal obstruction,	218	26	3	3	.....	1	.....	4	26
28	Cirrhosis of the liver,	264	.....	.....	.....	.....	.....	.....	.....	.....
29	Acute nephritis and Bright's disease,	2,509	25	5	6	7	6	18	39	110
30	Diseases of the female genital organs,	139	.....	.....	.....	.....	.....	.....	5	35
31	Puerperal fever,	128	.....	.....	.....	.....	.....	.....	7	60

PHILADELPHIA, (White).									
All Causes,									
117	1,253	1,038	493	333	253	517	747	1,709	
1,274	88	38	40	39	23	71	91	161	61
217	508	52	21	17	16	70	116	156	
1,410	6	21	5						
275									
3,156									
47									
24,251	4,312	1,038	493	333	253	517	747	1,709	
218	2	5	1	1	8	11	35	71	
10	2		1			1			
274	59	35	52	23	21	15	5	2	
192	7	20	39	19	27	42	11	10	
93	40	28	9	12	2	2			
480	28	91	92	71	66	101	12	10	
173	7	2	3		2	6	2	5	
2									
78	27	1							
2,652	33	11	1	11	1	1	1	4	
199	11	22	22	11	15	26	14	624	
160	15	11	4	4	4	11	10	9	
1,315	1	2	2	4	2	9	9	22	
95	26	11	9	6	7	8	4	4	
1,113	18	3		1	1	2	3	9	
2,677	42	4		1	1	39	97	107	
232	130	31	9	6	2	6		1	
136	7	1			1			5	
1,289	153	105	40	21	10	31	35	90	
983	389	197	63	34	18	25	16	22	
311	43	5	15	10	7	5	7	23	
254	51	4	5	4	1	9	4	12	
1,924	247	31	31	14	14	12	5	9	
186	1	1	1	3	1	11	33	39	
198	21	3	2		1		4	22	
222							2	6	
2,471	23	3	6	6	5	18	30	99	
150							5	15	
116							6	56	
118									
1,167	1,146	12		2		2	1		
214			1						
1,318	75	32	39	38	22	69	83	148	
271							11	53	
2,953	457	40	23	16	15	65	110	139	
42	4	19	4						

MORTALITY TABLE 8.

Deaths (exclusive of stillbirths) in each city having 100,000 population or over in 1910, from certain causes, by age.

CAUSE OF DEATH.		Age.									
Abridged National List Number.		All ages.	Under 1.	1.	2.	3.	4.	5 to 9.	10 to 19.	20 to 29.	
	PHILADELPHIA, (total).										
	All Causes,	26,276	4,769	1,151	530	357	273	592	832	1,954	
1	Typhoid fever,	230	..	5	1	1	8	11	37	75	
2	Typhus fever, .....	..	..	..	..	..	..	..	..	..
3	Malaria,	11	2	..	1	..	..	1	..	..
4	Smallpox, .....	..	..	..	..	..	..	..	..	..
5	Measles,	289	65	99	53	23	21	16	6	4	
6	Scarlet fever,	156	7	21	29	27	27	43	14	11	
7	Whooping cough,	109	46	3	10	13	3	..	..	..
8	Diphtheria and croup,	491	28	95	94	73	68	107	13	10	
9	Influenza,	183	8	4	3	..	2	6	2	7	
10	Asiatic cholera, .....	..	..	..	..	..	..	..	..	..
11	Cholera nostras,	2	..	..	..	..	..	..	..	..
12	Other epidemic diseases,	83	..	..	..	..	..	..	..	..
13	Tuberculosis of the lungs,	3,058	28	4	1	..	1	1	1	5	
14	Tuberculous meningitis, .....	..	38	14	11	17	2	23	215	742
15	Other forms of tuberculosis,	221	50	45	24	15	16	30	16	12	
16	Cancer and other malignant tumors,	1,834	16	11	2	5	6	18	15	37	
17	Meningitis,	1,379	1	2	2	4	2	6	6	26	
18	Cerebral hæmorrhage and softening,	1,102	28	14	10	6	7	8	4	5	
19	Organic diseases of the heart,	1,155	18	3	..	1	1	1	3	10	
20	Acute bronchitis,	2,862	44	6	7	2	4	42	100	115	
21	Chronic bronchitis,	274	168	40	11	6	4	9	..	1	
22	Pneumonia,	140	8	1	1	..	1	2	1	6	
23a	Bronchopneumonia,	1,421	180	125	46	26	10	33	44	102	
23b	Other diseases of the respiratory system,	1,091	435	221	107	37	23	28	16	27	
24	Diseases of the stomach,	1,038	6	5	19	10	2	6	9	25	
25	Diarrhoea and enteritis,	274	57	5	5	5	1	10	5	13	
26	Appendicitis and typhlitis,	1,598	1	38	38	12	17	12	5	13	
27	Hæmorrhoids and hæmorrhoids,	199	1	1	3	3	1	15	35	45	
28	Cirrhosis of the liver,	218	26	3	..	..	..	..	..	8
29	Acute nephritis and Bright's disease,	264	..	..	..	..	..	..	3	3
30	Diseases of the female genital organs,	2,599	25	5	6	7	6	18	39	110	
31	Puerperal fever,	128	..	..	..	..	..	..	5	35
										60	

PITTSBURGH, (total).										
All Causes.										
34	Scarle debility,	3	13	6	1	1	1	2	8	13
35	Violent deaths (excluding suicide),	92	51	12	1	1	1	5	1	17
36	Suicide,	4	2	2	1	1	1	1	6	1
37	Other diseases,	263	168	453	100	76	305	216	704	53
38	Unknown or ill defined diseases,	5	2	1	1	1	1	1	1	1
All Causes,										
1	Typhoid fever,	139	1	1	1	1	1	1	1	1
2	Typhus fever,	1	1	1	1	1	1	1	1	1
3	Malaria,	1	1	1	1	1	1	1	1	1
4	Smallpox,	1	1	1	1	1	1	1	1	1
5	Measles,	1	1	1	1	1	1	1	1	1
6	Scarlet fever,	10	10	10	7	6	6	18	6	4
7	Diphtheria,	109	43	35	7	6	6	18	6	4
8	Whooping cough,	127	32	14	18	13	9	28	9	2
9	Influenza,	64	2	1	1	1	1	1	1	6
10	Asiatic cholera,	1	1	1	1	1	1	1	1	1
11	Cholera nostras,	4	1	1	1	1	1	1	1	1
12	Other epidemic diseases,	41	12	5	4	4	1	10	1	1
13	Tuberculosis of the lungs,	575	9	3	3	4	51	162	51	162
14	Tuberculous meningitis,	49	7	4	5	5	7	7	7	5
15	Other forms of tuberculosis,	86	7	4	2	1	14	6	14	19
16	Cancer and other malignant tumors,	371	14	10	7	2	3	6	3	3
17	Measles,	52	14	10	7	2	3	6	3	3
18	Cerebral hæmorrhage and softening,	332	5	3	1	1	9	9	31	38
19	Organic diseases of the heart,	641	5	3	1	1	2	2	2	1
20	Acute bronchitis,	123	58	28	3	1	1	1	1	1
21	Chronic bronchitis,	598	21	21	3	3	15	15	15	62
22	Pneumonia,	596	184	86	18	6	16	16	16	8
23	Emphysema,	125	31	4	1	1	2	2	2	5
24	Diseases of the respiratory system,	133	34	3	6	3	7	7	7	5
25	Diseases of the stomach,	787	555	152	21	3	1	1	1	1
26	Diarrhoea and enteritis,	73	10	1	1	1	1	1	1	1
27	Appendicitis and typhlitis,	57	10	1	1	1	1	1	1	2
28	Hernia, intestinal obstruction,	131	1	1	1	1	1	1	1	1
29	Cirrhosis of the liver,	400	11	3	3	1	8	8	10	26
30	Acute nephritis and Bright's disease,	48	11	3	2	1	10	10	16	16
31	Diseases of the female genital organs,	56	56	56	56	56	56	56	56	16
32	Puerperal fever,	48	542	3	2	2	3	1	3	50
33	Other puerperal affections,	48	542	3	2	2	3	1	3	50
34	Congenital debility and malformations,	47	18	11	7	6	29	29	48	116
35	Scarle debility,	578	18	11	7	6	29	29	48	116
36	Violent deaths (excluding suicide),	103	24	23	8	5	39	39	39	73
37	Suicide,	334	24	23	8	5	39	39	39	73
38	Other diseases,	18	3	8	1	1	1	1	1	1
	Unknown or ill defined diseases,	18	3	8	1	1	1	1	1	1

TABLE 8.—Continued.

CAUSE OF DEATH.		Age.									
Abridged Inter- national List	Number.	All ages.	Under 1.	1.	2.	3.	4.	5 to 9.	10 to 19.	20 to 29.	
PITTSBURGH, (White).		7,656	1,730	422	158	92	71	198	280	660	
1	Typhoid fever,	133	.....	.....	1	2	3	10	22	49
2	Typhus fever, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3	Malaria, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4	Smallpox, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5	Measles,	46	7	21	7	4	1	5	.....	.....
6	Scarlet fever,	58	1	5	10	7	6	18	.....	.....
7	Whooping cough,	89	39	32	8	5	4	1	6	.....
8	Diphtheria and croup,	136	13	13	27	18	15	23	9	.....
9	Influenza,	63	2	1	1	.....	1	1	.....	.....
10	Asiatic cholera, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....
11	Cholera nostras,	3	.....	.....	.....	.....	.....	.....	.....	.....
12	Other epidemic diseases,	38	12	5	2	.....	.....	.....	.....	.....
13	Tuberculosis of the lungs,	513	9	3	4	.....	3	4	42	148
14	Tuberculous meningitis,	42	6	4	5	1	5	6	6	.....
15	Other forms of tuberculosis,	76	7	4	2	1	.....	5	9	.....
16	Cancer and other malignant tumors,	361	.....	.....	.....	.....	.....	6	3	.....
17	Meningitis,	50	13	10	6	2	.....	1	1	.....
18	Cerebral hemorrhage and softening,	318	5	3	.....	.....	.....	3	3	.....
19	Organic diseases of the heart,	698	53	25	3	.....	.....	9	28	38
20	Acute bronchitis,	122	.....	.....	.....	.....	.....	2	1	.....
21	Chronic bronchitis,	68	.....	.....	.....	.....	1	.....	.....	.....
22	Pneumonia,	534	33	20	11	.....	4	5	12	59
23a	Bronchopneumonia,	493	182	76	26	16	6	16	.....	.....
23b	Other diseases of the respiratory system,	118	11	4	5	.....	1	2	4	.....
24	Diseases of the stomach,	159	33	3	.....	.....	3	2	2	.....
25	Diarrhoea and enteritis,	754	532	145	20	6	3	6	2	.....
26	Appendicitis and typhlitis,	71	.....	.....	.....	.....	.....	9	1	.....
27	Hernia, intestinal obstruction,	55	10	1	.....	1	1	.....	18	16
28	Cirrhosis of the liver,	128	.....	.....	.....	.....	.....	.....	.....	.....
29	Acute nephritis and Bright's disease,	371	11	3	2	.....	1	8	10	23
30	Diseases of the female genital organs,	44	.....	.....	.....	.....	.....	.....	2	13
31	Puerperal fever,	56	.....	.....	.....	.....	.....	.....	5	16
32	Other puerperal affections,	46	.....	.....	.....	.....	.....	.....	16	13
33	Congenital debility and malformations,	523	518	3	.....	.....	1	.....	2	19

TABLE 8.—Continued.

CAUSE OF DEATH.		Age.								
Abridged International List Number.		30 to 39.	40 to 49.	50 to 59.	60 to 69.	70 to 79.	80 to 89.	90 to 99.	100 and over.	Un-known.
PHILADELPHIA, (total).										
	All Causes,	2,579	2,669	3,078	3,331	2,701	1,271	182	6	1
1	Typhoid fever,	45	25	12	7	3	.....	.....	.....	.....
2	Typhus fever, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3	Malaria,	2	3	.....	.....	2	.....	.....	.....	.....
4	Smallpox, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5	Measles, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....
6	Scarlet fever,	3	1	.....	.....	1	.....	.....	.....	.....
7	Whooping cough, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....
8	Diphtheria and croup, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....
9	Influenza,	6	16	18	35	46	26	4	.....	.....
10	Asiatic cholera, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....
11	Cholera nostras, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....
12	Other epidemic diseases,	6	11	4	11	8	.....	.....	.....	.....
13	Tuberculosis of the lungs,	854	550	338	186	58	9	1	.....	.....
14	Tuberculous meningitis,	6	3	.....	.....	.....	.....	.....	.....	.....
15	Other forms of tuberculosis,	36	14	19	9	4	.....	.....	.....	.....
16	Cancer and other malignant tumors,	108	227	375	352	197	68	5	.....	.....
17	Meningitis,	8	4	5	3	.....	.....	.....	.....	.....
18	Cerebral hæmorrhage and softening,	32	92	203	304	316	142	25	.....	.....
19	Organic diseases of the heart,	236	330	431	688	571	256	30	.....	.....
20	Acute bronchitis,	2	.....	6	8	.....	.....	.....	.....	.....
21	Chronic bronchitis,	4	.....	14	27	26	34	9	.....	.....
22	Pneumonia,	139	179	176	191	122	48	3	.....	.....
23a	Broncho-pneumonia,	21	24	34	67	54	17	7	.....	.....
23b	Other diseases of the respiratory system,	41	35	34	29	33	13	3	.....	.....
24	Diseases of the stomach,	21	25	32	33	37	19	.....	.....	.....
25	Diarrhoea and enteritis,	17	20	23	27	28	24	2	.....	.....
26	Appendicitis and typhilitis,	32	29	21	11	.....	.....	.....	.....	.....
27	Hernia, intestinal obstruction,	16	25	31	41	30	11	1	.....	.....
28	Girrhosis of the liver,	36	61	61	49	34	6	.....	.....	.....
29	Acute nephritis and Bright's disease,	215	329	521	600	486	204	27	.....	.....
30	Diseases of the female genital organs,	32	41	18	5	3	.....	.....	.....	.....
31	Puerperal fever,	51	10	.....	.....	.....	.....	.....	.....	.....
32	Other puerperal affections,	68	12	.....	.....	.....	.....	.....	.....	.....
33	Congenital debility and malformations, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....
34	Senile debility, .....	.....	.....	.....	14	71	106	24	.....	.....

TABLE 8.—Continued.

Abridged Inter- national List	CAUSE OF DEATH.	Age.							
		30 to 39.	40 to 49.	50 to 59.	60 to 69.	70 to 79.	80 to 89.	90 to 99.	100 and over.
35	Violent deaths (excluding suicide),	217	184	177	128				
36	Suicide,	66	58	41	29	90	51	11	1
37	Other diseases,	262	347	463	459	438	205	22	1
38	Unknown or ill defined diseases,		3	1	6	2	2		1
	PHILADELPHIA, (White).								
	All Causes,	2,261	2,402	2,900	3,203	2,630	1,264	172	4
1	Typhoid fever,	44	30	12	7	3			
2	Typhus fever,								
3	Malaria,	2	2			2			
4	Smallpox,								
5	Measles,		1			1			
6	Scarlet fever,	3	1						
7	Whooping cough,								
8	Diphtheria and croup,	2							
9	Influenza,	4	15	16	35	46	26	4	
10	Asiatic cholera,								
11	Cholera nostras,								
12	Other epidemic diseases,	5	11	10	10	8	2		
13	Tuberculosis of the lungs,	724	492	313	170	56	8	1	
14	Tuberculosis of other organs,	34	13	1					
15	Other forms of tuberculosis,	24	13	19	9	3			
16	Cancer and other malignant tumors,	97	215	353	344	192	66	5	
17	Measuritis,	7	4	3	3				
18	Cerebral hæmorrhage and softening,	29	53	190	295	312	139	24	2
19	Organic diseases of the heart,	203	283	405	659	547	253	25	
20	Acute bronchitis,	1		6					
21	Chronic bronchitis,	3		8					
22	Pneumonia,	120	161	167	185	141	11	9	
23a	Bronchopneumonia,	19	18	33	65	26	34	4	
23b	Other diseases of the respiratory system,	30	27	45	38	51	47	3	
24	Diseases of the stomach,	20	23	32	36	43	17	3	
25	Diarrhoea and enteritis,	11	21	18	33	36	17	2	
26	Appendicitis and typhlitis,	31	26	31	26	27	23	2	
27	Peritonitis, intestinal obstruction,	15	21	27	11	4			
28	Chirrosis of the liver,	34	59	60	43	30	11	1	

	186	295	488	568	472	198	23	1
Acute nephritis and Bright's disease,	29	186	17	4	3	198	23	1
Diseases of the female genital organs,	30	26	37	1	3	198	23	1
Puerperal fever,	31	26	37	1	3	198	23	1
Other puerperal affections,	32	65	10	1	1	198	23	1
Other genital affections,	33	65	10	1	1	198	23	1
Congenital debility and malformations,	34	197	2	11	70	104	24	1
Senile debility, (excluding suicide),	35	169	171	126	86	51	11	1
Violent deaths, (excluding suicide),	36	63	58	29	13	3	11	1
Suicide,	37	237	315	444	429	261	22	1
Other diseases,	38	3	1	6	2	2	1	1
Unknown or ill defined diseases,	39	3	1	6	2	2	1	1
PHILADELPHIA, (Colored).								
All Causes,	318	267	178	128	71	25	10	2
Typhoid fever,	1	5	1	1	1	1	1	1
Typhus fever,	2	1	1	1	1	1	1	1
Malaria,	3	1	1	1	1	1	1	1
Smallpox,	4	1	1	1	1	1	1	1
Measles,	5	1	1	1	1	1	1	1
Scarlet fever,	6	1	1	1	1	1	1	1
Whooping cough,	7	1	1	1	1	1	1	1
Diphtheria and croup,	8	1	1	1	1	1	1	1
Influenza,	9	1	1	1	1	1	1	1
Asiatic cholera,	10	1	1	1	1	1	1	1
Other epidemic diseases,	11	1	1	1	1	1	1	1
Tuberculosis of the lungs,	12	133	58	16	2	1	1	1
Tuberculous meningitis,	13	1	2	1	1	1	1	1
Other forms of tuberculosis,	14	2	1	1	1	1	1	1
Cancer and other malignant tumors,	15	11	12	8	5	3	1	1
Meningitis,	16	1	1	1	1	1	1	1
Cerebral hæmorrhage and softening,	17	3	7	9	4	3	1	1
Organic diseases of the heart,	18	33	26	29	24	3	5	1
Acute bronchitis,	19	1	1	1	1	1	1	1
Chronic bronchitis,	20	1	1	1	1	1	1	1
Pneumonia,	21	19	9	6	1	1	1	1
Bronchopneumonia,	22	2	6	2	3	1	1	1
Other diseases of the respiratory system,	23a	11	8	3	1	1	1	1
Diseases of the stomach,	24	2	1	1	1	1	1	1
Diarrhoea and enteritis,	25	2	2	1	1	1	1	1
Appendicitis and typhlitis,	26	1	4	1	1	1	1	1
Hernia, intestinal obstruction,	27	1	4	1	1	1	1	1
Cirrhosis of the liver,	28	2	2	1	1	1	1	1
Acute nephritis and Bright's disease,	29	20	34	32	14	6	4	1
Diseases of the female genital organs,	30	6	1	1	1	1	1	1
Puerperal fever,	31	5	1	1	1	1	1	1
Other genital affections,	32	3	2	1	1	1	1	1
Congenital debility and malformations,	33	1	1	1	1	1	1	1
Senile debility,	34	1	1	1	1	1	1	1
Violent deaths (excluding suicide),	35	20	15	3	4	2	1	1
Suicide,	36	3	3	15	9	4	1	1
Other diseases,	37	25	32	23	9	4	1	1
Unknown or ill defined diseases,	38	1	1	1	1	1	1	1

TABLE 8.—Continued.

CAUSE OF DEATH.			Age.								
Abridged International List Number.			30 to 39.	40 to 49.	50 to 59.	60 to 69.	70 to 79.	80 to 89.	90 to 99.	100 and over.	Un-known.
PITTSBURGH, (Total).											
All Causes.			801	803	864	850	675	218	23	1	
1	25	Typhoid fever.	25	16	3	2					
2		Typhus fever.									
3		Malaria.									
4		Smallpox.									
5	1	Measles.	1								
6		Scarlet fever.			1						
7		Whooping cough.									
8	1	Diphtheria and croup.	1								
9	4	Influenza.	4	2	7	15	14	10			
10		Asiatic cholera.									
11	1	Cholera nostras.	1								
12	3	Other epidemic diseases.	3	4	5	1	5	2			
13	152	Tuberculosis of the lungs.	152	39	43	23	10				
14	3	Tuberculous meningitis.	3	2	1						
15	11	Other forms of tuberculosis.	11	8		4					
16	33	Cancer and other malignant tumors.	33	65	99	98	55	8			
17		Neuritis.		1	4						
18	18	Cerebral hemorrhage and softening.	18	24	47	101	101	23	3		
19	56	Organic diseases of the heart.	56	91	121	133	110	43	3		
20		Acute bronchitis.		1	2	5	12	17			
21		Chronic bronchitis.		3	6	18	26	7	1		
22		Pneumonia.		88	99	74	55	23	3		
23a	102	Bronchopneumonia.	102	9	36	33	40	17	3		
23b	15	Other diseases of the respiratory system.	15	16	16	23	12	6			
24	17	Diseases of the stomach.	17	12	15	21	16	9	1		
25	9	Diarrhoea and enteritis.	9	6	3	7	13	7			
26		Appendicitis and typhlitis.		11	8	2					
27	4	Hernia, intestinal obstruction.	4	13	9	8	4	3	1		
28		Cirrhosis of the liver.		4	9						
29	13	Acute nephritis and Bright's disease.	13	27	32	33	15	3			
30	39	Diseases of the female genital organs.	39	46	78	89	69	14	1		
31	12	Puerperal fever.	12	8	7	2	1				
32	31	Other puerperal affections.	31	4							
33	19	Congenital debility and malformations.	19	6							

TABLE 8. Continued.

Abstracted National Inst.	CAUSE OF DEATH.	Age.									
		30 to 39.	40 to 49.	50 to 59.	60 to 69.	70 to 79.	80 to 89.	90 to 99.	100 and over.	Un- known.	
	ALL Causes.	59	52	53	32	18	3	2	1		
1	Typhoid fever,										
2	Typhus fever,										
3	Malaria,										
4	Smallpox,										
5	Measles,										
6	Scarlet fever,										
7	Whooping cough,										
8	Diphtheria and croup,										
9	Influenza,					1					
10	Asiatic cholera,										
11	Cholera nostras,										
12	Other epidemic diseases,			1		2					
13	Tuberculosis of the lungs,	16	10	2	3	1					
14	Tuberculosis meningitis,		1								
15	Other forms of tuberculosis,			1							
16	Cancer and other malignant tumors,	2	2	4	2						
17	Meningitis,										
18	Cerebral hemorrhage and softening,	1	1	3	6	2		1			
19	Organic diseases of the heart,	6	8	10	4	1	1				
20	Acute bronchitis,				1						
21	Chronic bronchitis,										
22	Pneumonia,	11	5	7	1	3					
23a	Bronchopneumonia,			2							
23b	Other diseases of the respiratory system,	1	1	2	1	1		1			
24	Diseases of the stomach,	1	2	1	1						
25	Diarrhoea and enteritis,		1								
26	Appendicitis and typhilitis,	1									
27	Hernia, intestinal obstruction,	1		1							
28	Cirrhosis of the liver,			1	1						
29	Acute nephritis and Bright's disease,			2							
30	Diseases of the female genital organs,	4	6	9	3	2	2				
31	Puerperal fever,										
32	Other puerperal affections,										
33	Congenital debility and malformations,										
34	Scutle debility,				1	2			1		

Violent deaths (excluding suicide),									
Suicide,									
Other diseases,									
Unknown or ill defined diseases,									
SCRANTON.									
All Causes,									
1	2	3	4	5	6	7	8	9	10
Typhoid fever,	1	1	1	1	1	1	1	1	1
Typhus fever,	2	2	2	2	2	2	2	2	2
Malaria,	3	3	3	3	3	3	3	3	3
Measles,	4	4	4	4	4	4	4	4	4
Scarlet fever,	5	5	5	5	5	5	5	5	5
Whooping cough,	6	6	6	6	6	6	6	6	6
Diphtheria and croup,	7	7	7	7	7	7	7	7	7
Induenza,	8	8	8	8	8	8	8	8	8
Asiatic cholera,	9	9	9	9	9	9	9	9	9
Cholera nostras,	10	10	10	10	10	10	10	10	10
Other epidemic diseases,	11	11	11	11	11	11	11	11	11
Tuberculosis of the lungs,	12	12	12	12	12	12	12	12	12
Tuberculous meningitis,	13	13	13	13	13	13	13	13	13
Other forms of tuberculosis,	14	14	14	14	14	14	14	14	14
Cancer and other malignant tumors,	15	15	15	15	15	15	15	15	15
Meningitis,	16	16	16	16	16	16	16	16	16
Cerebral hæmorrhage and softening,	17	17	17	17	17	17	17	17	17
Organic diseases of the heart,	18	18	18	18	18	18	18	18	18
Acute endocarditis,	19	19	19	19	19	19	19	19	19
Chronic endocarditis,	20	20	20	20	20	20	20	20	20
Pneumonia,	21	21	21	21	21	21	21	21	21
Bronchitis,	22	22	22	22	22	22	22	22	22
Pneumonitis,	23	23	23	23	23	23	23	23	23
Bronchopneumonia,	24	24	24	24	24	24	24	24	24
Other diseases of the respiratory system,	25	25	25	25	25	25	25	25	25
Diseases of the stomach,	26	26	26	26	26	26	26	26	26
Diarrhoea and enteritis,	27	27	27	27	27	27	27	27	27
Appendicitis and typhilitis,	28	28	28	28	28	28	28	28	28
Hæmilia, intestinal obstruction,	29	29	29	29	29	29	29	29	29
Cirrhosis of the liver,	30	30	30	30	30	30	30	30	30
Acute nephritis and Bright's disease,	31	31	31	31	31	31	31	31	31
Diseases of the female genital organs,	32	32	32	32	32	32	32	32	32
Puerperal fever,	33	33	33	33	33	33	33	33	33
Other puerperal affections,	34	34	34	34	34	34	34	34	34
Congenital debility and malformations,	35	35	35	35	35	35	35	35	35
Neuritic debility,	36	36	36	36	36	36	36	36	36
Violent deaths (excluding suicide),	37	37	37	37	37	37	37	37	37
Other diseases,	38	38	38	38	38	38	38	38	38
Unknown or ill defined diseases,	39	39	39	39	39	39	39	39	39

8	Diphtheria and croup,	1,177	109	113	92	69	61	59	40	76	126	140	135
9	Influenza,	417	88	95	56	19	9	4	6	6	17	19	38
12	Tuberculosis of the lungs,†	5,362	485	521	464	463	413	403	347	401	368	452	58
14-15	Other forms of tuberculosis,	5,839	55	73	87	91	63	79	77	70	46	61	58
17	Meningitis,	338	24	33	36	34	27	28	33	19	29	22	30
20-21	Bronchitis,	913	112	124	115	62	35	41	31	32	60	103	94
22	Pneumonia (lobar and unqualified),	3,574	495	466	427	304	134	132	95	127	176	260	417
23	Bronchopneumonia,	2,431	309	283	314	263	208	113	112	99	114	132	178
(34)	Diarrhoea and enteritis (under 2 years),	4,428	170	164	171	188	313	1,109	862	612	318	182	136
(37)	Diarrhoea and enteritis (2 years and over),	560	38	38	24	39	46	39	96	53	52	31	33
(38)	Congenital debility,†	1,160	80	80	69	78	87	129	156	165	121	88	61
35	Violent deaths (excluding suicide),	3,365	345	310	306	320	329	352	231	232	334	304	321
36	Suicide,	582	36	63	61	63	2,561	2,468	2,173	2,207	2,567	2,443	2,612
	All other causes,	30,109	2,580	2,843	2,723	2,561	2,930	2,468	2,173	2,207	2,567	2,443	2,612
	Rural,	53,383	4,968	5,048	4,839	4,297	3,533	4,466	4,822	4,445	4,030	3,934	4,295
	All Causes,*												
1	Typhoid fever,	825	61	55	48	48	42	41	93	98	123	85	70
3	Malaria,	21	2	2	1	4	1	2	2	2	1	.....	4
5	Measles,	331	33	44	55	70	14	9	6	4	7	13	19
6	Scarlet fever,	325	37	39	41	40	29	13	15	10	13	13	28
7	Whooping cough,	618	50	68	73	73	48	48	43	45	37	27	42
8	Diphtheria and croup,	984	96	86	58	46	37	48	41	80	146	144	173
9	Influenza,	732	151	160	91	33	13	9	8	4	8	38	55
12	Tuberculosis of the lungs,†	3,971	365	406	432	371	312	341	283	280	296	275	316
14-15	Other forms of tuberculosis,	532	35	44	46	57	34	41	39	51	40	39	41
17	Meningitis,	369	42	27	32	36	21	34	39	26	29	26	31
20-21	Bronchitis,	724	102	119	74	49	24	21	27	19	47	65	76
22	Pneumonia (lobar and unqualified),	3,245	490	474	398	262	89	78	76	117	169	250	348
(23)	Bronchopneumonia,	1,712	274	266	244	175	134	64	45	50	97	113	175
25	Diarrhoea and enteritis (under 2 years),	3,738	100	113	102	117	132	137	672	1,086	776	286	81
(37)	Diarrhoea and enteritis (2 years and over),	545	33	23	31	43	35	63	84	84	64	29	20
(38)	Congenital debility,†	1,385	113	111	106	78	75	138	192	180	130	96	85
35	Violent deaths (excluding suicide),	4,363	314	289	378	392	380	515	380	394	327	332	346
36	Suicide,	522	19	26	46	46	34	48	41	45	40	38	33
	All other causes,	28,522	2,648	2,673	2,636	2,466	2,083	2,352	2,306	2,185	2,230	2,185	2,352
	Philadelphphia, (total),	26,276	2,354	2,666	2,442	2,182	1,817	2,424	1,938	1,820	2,087	2,013	2,268
	All Causes,*												
1	Typhoid fever,	230	18	17	15	11	10	16	30	29	23	19	26
3	Malaria,	11	.....	2	1	1	1	.....	2	1	4	1	.....
5	Measles,	289	48	47	64	49	16	.....	.....	.....	1	.....	4

*Exclusive of stillbirths.
†Including "acute miliary tuberculosis."
‡Excluding "premature birth."

TABLE 9. —Continued.

Abridged International List Number.	Cause of Death.	Month of Death.											
		January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.
4	Scarlet fever,	39	30	31	24	21	16	6	6	5	2	5	10
7	Whooping cough,	109	10	18	9	10	9	10	9	5	1	8	7
8	Diphtheria and croup,	491	66	68	45	39	32	20	15	18	42	50	54
9	Influenza,	183	21	31	26	26	9	21	24	202	283	233	270
13	Tuberculosis of the lungs,	3,068	279	283	289	255	263	241	243	241	243	243	243
14-15	Other forms of tuberculosis,	467	19	45	41	46	36	40	36	34	34	24	28
17	Meningitis,	102	2	4	11	10	13	10	8	4	9	6	11
20-21	Bronchitis,	414	44	57	51	30	20	19	12	12	26	49	53
22	Pneumonia, (diphtheria and unqualified),	1,421	189	183	232	166	110	51	50	38	51	82	101
(23)	Pneumonia,	1,091	117	136	144	116	97	47	55	45	55	66	173
(24)	Diarrhoea and enteritis (under 2 years),	1,864	71	67	62	86	101	103	465	238	139	79	68
(25)	Diarrhoea and enteritis (2 years and over),	235	15	19	14	9	20	21	25	41	21	8	18
(37)	Congenital debility,†	385	28	17	27	28	22	39	48	61	39	32	17
(38)	Violent deaths (excluding suicide),	1,410	117	107	115	93	91	265	110	83	101	106	112
35	Suicide,	15	27	24	33	33	27	22	21	21	15	24	13
36	All other causes,	14,108	1,270	1,404	1,314	1,219	1,020	1,130	952	973	1,210	1,217	1,194
	Philadelphia, (white),	24,251	2,155	2,455	2,262	2,002	1,659	2,206	1,802	1,710	1,890	1,857	2,069
1	Typhoid fever,	218	16	17	15	9	9	14	30	29	21	18	25
2	Malaria,	10	.....	2	1	1	1	.....	2	1	1	.....	4
5	Measles,	274	46	40	62	47	16	7	.....	4	4	1	.....
6	Scarlet fever,	192	39	30	24	21	15	6	5	5	2	5	10
7	Whooping cough,	93	8	13	7	9	7	10	6	1	1	6	6
8	Diphtheria and croup,	480	50	67	45	39	21	20	15	18	41	49	50
9	Influenza,	173	19	33	26	9	3	.....	3	2	2	7	17
13	Tuberculosis of the lungs,	2,612	232	259	241	225	184	207	200	188	211	205	238
14-15	Other forms of tuberculosis,	339	15	35	37	38	32	37	26	31	22	21	26
17	Meningitis,	95	2	4	10	10	13	10	8	4	9	5	9

	20-21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50
Bronchitis,	368																													
Pneumonia (fatal and unqualified),	1,289	170	165	214	152	49	43	59	59	59	59	59	59	59	59	59	59	59	59	59	59	59	59	59	59	59	59	59	59	59
Bronchopneumonia,	983	109	114	124	106	87	106	87	87	87	87	87	87	87	87	87	87	87	87	87	87	87	87	87	87	87	87	87	87	87
Diarrhoea and enteritis (under 2 years),	1,707	61	61	59	81	13	9	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18
Diarrhoea and enteritis (2 years and over),	217	14	17	13	9	22	23	22	22	22	22	22	22	22	22	22	22	22	22	22	22	22	22	22	22	22	22	22	22	22
Congenital debility,†	347	27	16	22	23	22	23	22	22	22	22	22	22	22	22	22	22	22	22	22	22	22	22	22	22	22	22	22	22	22
Violent deaths (excluding suicide),	1,318	112	96	101	109	84	109	84	84	84	84	84	84	84	84	84	84	84	84	84	84	84	84	84	84	84	84	84	84	84
Suicide,	271	14	27	24	33	26	33	26	26	26	26	26	26	26	26	26	26	26	26	26	26	26	26	26	26	26	26	26	26	26
All other causes,	13,215	1,132	1,134	1,318	1,239	1,239	1,239	1,239	1,239	1,239	1,239	1,239	1,239	1,239	1,239	1,239	1,239	1,239	1,239	1,239	1,239	1,239	1,239	1,239	1,239	1,239	1,239	1,239	1,239	1,239
Philadelphia, (colored),	2,025	159	161	211	150	211	150	180	180	180	180	180	180	180	180	180	180	180	180	180	180	180	180	180	180	180	180	180	180	180
All Causes.*																														
1 Typhoid fever,	12	2	1	.....	.....	.....	.....	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2
3 Malaria,	1	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5 Measles,	15	2	5	3	2	3	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2
6 Scarlet fever,	3	2	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
7 Whooping cough,	16	2	2	2	2	2	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
8 Diphtheria and croup,	11	2	1	1	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
10 Influenza,	10	2	1	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
12 Tuberculosis of the lungs,	416	47	23	30	48	30	48	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30
14-15 Other forms of tuberculosis,	46	4	3	10	4	1	4	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8
17 Meningitis,	7	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
20-21 Bronchitis,	46	8	6	8	8	8	8	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2
22 Pneumonia (fatal and unqualified),	132	19	18	18	14	11	14	11	11	11	11	11	11	11	11	11	11	11	11	11	11	11	11	11	11	11	11	11	11	11
(23) Bronchopneumonia,	108	8	12	20	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10
25 Diarrhoea and enteritis (under 2 years),	157	7	6	3	5	11	5	11	15	15	15	15	15	15	15	15	15	15	15	15	15	15	15	15	15	15	15	15	15	15
(37) Diarrhoea and enteritis (2 years and over),	18	1	2	1	.....	.....	.....	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2
(33) Congenital debility,†	38	1	1	5	4	6	4	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6
35 Violent deaths (excluding suicide),	92	5	11	6	6	9	6	9	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5
36 Suicide,	4	1	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
All other causes,	893	78	71	86	75	85	75	85	67	67	67	67	67	67	67	67	67	67	67	67	67	67	67	67	67	67	67	67	67	67
Pittsburgh, (total),	8,099	821	717	756	679	659	679	659	589	589	589	589	589	589	589	589	589	589	589	589	589	589	589	589	589	589	589	589	589	589
All Causes.*																														
1 Typhoid fever,	139	16	15	12	8	4	8	4	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12
3 Malaria, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5 Measles,	51	5	1	8	14	4	14	4	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7
6 Scarlet fever,	58	29	11	5	4	.....	.....	.....	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2
7 Whooping cough,	102	15	13	16	7	15	7	15	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7
8 Diphtheria and croup,	127	8	10	5	7	4	7	4	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10
9 Influenza,	64	13	20	10	5	2	5	2	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20
12 Tuberculosis of the lungs,	505	60	62	60	59	47	60	59	47	46	46	46	46	46	46	46	46	46	46	46	46	46	46	46	46	46	46	46	46	46
14-15 Other forms of tuberculosis,	125	11	8	9	29	14	29	14	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5
17 Meningitis,	52	5	3	3	5	7	5	7	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4

*Exclusive of stillbirths, excluding premature birth.

(33) Congenital debility,†	140	8	8	7	8	14	20	18	29	8	11	10
35 Violent deaths (excluding suicide),	543	41	19	33	49	57	77	42	40	54	39	51
36 Suicide,	100	8	11	10	9	11	9	7	3	7	9	6
All other causes,	3,486	344	312	339	296	257	286	286	273	319	317	381
Pittsburgh, (colored),	443	47	53	42	36	29	48	35	30	30	28	28
All Causes.*												
1 Typhoid fever,	6	1		3				1			1	
2 Malaria,												
3 Measles,	5			1	1		1					
6 Scarlet fever,												
7 Whooping cough,	13	2	1	6		1	1	2				
8 Diphtheria and croup,	1											1
9 Influenza,	1			1								
13 Tuberculosis of the lungs,	62	6	5	6	7	3	4	4	9	5	5	2
14-15 Other forms of tuberculosis,	17	2	1	4	4		1	2	1	2	4	
17 Meningitis,	2	1						1				
20-21 Bronchitis,	7	2	2		3	1	3		1			
22 Pneumonia (lobar and unqualified),	42	6	9	2	6	2	2	2	1	5	1	6
(23) Bronchopneumonia,	35	4	6	5	3	2	2	1	3	1	4	1
25 Diarrhoea and enteritis (under 2 years),	50		4	2	2	1	10	3	3		1	1
(37) Diarrhoea and enteritis (2 years and over),	3						1					
(33) Congenital debility,†	11	2		2		3	1		1	2		
35 Violent deaths (excluding suicide),	35	3	5	4	2	1	10	5	1	3	1	
36 Suicide,	170	20	17	13	16	15	14	13	13	13	11	17
All other causes,												
Scranton,	1,974	161	150	163	187	134	228	150	170	151	164	162
All Causes.*												
1 Typhoid fever,	19	2	2	1			1	1	4	5	1	1
2 Malaria,												
3 Measles,	8		5				1		1			
6 Scarlet fever,	9		2	1	1	1	1		1	1	2	
7 Whooping cough,	6			1	1		1		1			
8 Diphtheria and croup,	17	5	4	1	2	1	1	1		1	1	1
9 Influenza,	15	3	4	3			1				3	
13 Tuberculosis of the lungs,	133	15	9	11	10	10	10	13	11	14	8	7
14-15 Other forms of tuberculosis,	17	3	1	3	3		3	3	1	1	1	
17 Meningitis,	15		1	1	1	2	1	2	1	1		3

*Exclusive of stillbirths.

†Excluding premature birth.

TABLE 9.—Continued.

Abridged International List Number.	Cause of Death.	Month of Death.											
		January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.
20-21	Bronchitis,	48		8	6	10		10	1	1	1	7	5
22	Pneumonia (lobar and unqualified),	152	14	26	20	14	10	10	2	2	6	20	16
(23)	Empyema,	115	10	16	10	13	18	78	25	8	6	11	6
24	Diarrhea and enteritis (under 2 years),	231	9	8	6	6	18	18	32	31	18	11	6
(25)	Diarrhea and enteritis (2 years and over),	24	1	1	2	1	2	1	5	2	.....	2	1
(37)	.....											
(38)	Congenital debility,†	24	1	1	2	4	.....	1	3	4	1	3	4
(39)	Violent deaths (excluding suicide),	236	18	20	30	23	13	18	22	21	18	20	23
36	Suicide,	12	1	.....	.....	1	5	.....	.....	1	.....	1	1
	All other causes,	898	77	77	90	70	69	96	49	78	75	75	84

†Excluding premature birth.

MORTALITY TABLE 10.

Deaths from certain causes, during each of the first 3 days of life, the remainder of the first week, weeks of the first month, months of the first quarter, and remaining quarters for the first year. (Stillbirths excluded.)

Cause of Death.	Age, Under One Year, in Completed Days, Weeks or Months.														
	Days.			Weeks.			Months.								
	Under one.	Two.	Three to six.	Under one.	One.	Two.	Three.*	Under one.	One.	Two.	Three to five.	Six to eight.	Nine to eleven.		
Entire State,	24,195	2,431	1,018	729	1,554	5,735	1,503	1,221	965	9,424	2,317	1,915	4,559	3,376	2,604
Total cities including cities of over 10,000 population, All causes,	11,827	1,151	423	355	688	2,617	637	553	415	4,272	1,093	997	2,311	1,767	1,287
Measles,	115	1	1	1	1	2	1	1	1	3	3	2	10	40	60
Scarlet fever,	21	1	1	1	1	1	1	1	1	3	3	1	7	7	9
Whooping cough,	194	1	1	1	1	1	1	4	6	11	28	23	40	42	50
Diphtheria and croup,	94	1	1	1	1	1	1	3	1	3	3	2	13	11	33
Influenza,	24	1	1	1	1	1	1	2	3	5	2	3	3	5	6
Dysentery,	97	1	1	1	1	1	1	5	5	12	7	8	12	7	7
Dyspepsia,	53	1	1	1	1	1	1	1	1	13	7	15	15	7	4
Typhoid,	13	1	1	1	1	8	3	2	1	3	2	10	18	13	35
Tuberculosis of the lungs,	81	1	1	1	1	1	1	1	1	2	2	5	16	25	32
Tuberculous meningitis,	80	1	1	1	1	1	1	1	1	1	1	2	14	3	9
Other forms of tuberculosis,	34	1	1	1	1	1	1	1	1	1	1	5	16	3	9
Syphilis,	139	12	4	2	9	27	12	15	10	64	16	16	31	31	6
Meningitis,	111	1	1	1	5	5	6	3	4	18	11	9	24	23	36
Convulsions,	352	6	12	16	46	80	25	19	29	144	50	25	68	50	38
Organic diseases of the heart,	81	10	2	7	12	31	4	7	3	45	4	11	8	8	8

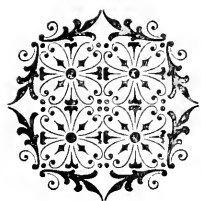
Other forms of tuberculosis,	30	1	.....	3	.....	2	3	1	1	.....	4	5	.....	1	9	5	6
Syphilis,	50	3	.....	.....	.....	.....	8	8	8	.....	.....	8	.....	5	8	.....	.....
Measles,	138	10	.....	.....	.....	.....	5	5	5	.....	.....	14	.....	7	33	39	27
Whooping cough,	546	10	.....	.....	.....	.....	.....	.....	.....	.....	.....	55	.....	44	101	47	28
Diphtheria and croup,	99	13	4	8	.....	.....	14	39	8	.....	.....	59	.....	14	13	3	2
Organic diseases of the heart,	260	.....	2	.....	.....	.....	6	8	17	.....	13	55	.....	47	30	59	30
Acute bronchitis,	803	3	.....	.....	.....	.....	17	29	48	.....	33	150	.....	78	183	135	132
Bronchopneumonia,	790	.....	.....	.....	.....	.....	76	38	41	.....	47	38	.....	71	198	138	117
Pneumonia,	335	.....	.....	.....	.....	.....	28	22	25	.....	25	88	.....	53	44	76	49
Diseases of the stomach,	3,023	5	.....	.....	.....	.....	29	45	78	.....	113	359	.....	274	896	697	481
Diarrhoea and enteritis, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Malformations,	716	131	87	63	130	411	77	47	32	.....	32	567	.....	51	26	42	19
Premature birth,	1,737	750	277	126	195	1,318	167	90	50	.....	50	1,655	.....	56	13	9	11
Constitutional debility,	1,616	173	91	60	194	518	177	121	82	.....	82	898	.....	168	169	244	92
Injuries at birth,	2,268	130	54	22	33	239	17	7	2	.....	7	295	.....	1	.....	.....	.....
External causes,	153	5	.....	.....	.....	.....	11	29	5	.....	2	40	.....	16	17	30	20
Ill defined and unknown,	223	41	19	19	23	102	18	12	11	.....	11	143	.....	28	12	20	19
All other causes,	713	17	17	23	72	129	75	50	28	.....	28	282	.....	82	53	88	82
Philadelphia, (total).	4,769	392	163	147	262	964	264	226	158	.....	158	1,606	.....	402	409	955	617
All causes, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Measles,	65	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Scarlet fever,	7	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Whooping cough,	46	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Diphtheria and croup,	28	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Indurata,	8	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Dysentery,	5	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Erysipelas,	22	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Tetanus,	5	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Tuberculosis of the lungs,	38	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Tuberculous meningitis,	50	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Other forms of tuberculosis,	16	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Syphilis,	74	6	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Measles,	28	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Whooping cough,	82	1	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Diphtheria and croup,	44	3	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Organic diseases of the heart, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Acute bronchitis,	158	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Pneumonia,	180	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Bronchopneumonia,	439	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Diseases of the stomach,	57	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Diarrhoea and enteritis,	1,598	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Malformations,	228	35	18	28	47	128	34	15	7	.....	7	184	.....	16	9	12	10
Premature birth,	630	247	88	47	67	449	76	42	23	.....	23	590	.....	25	6	4	5
Constitutional debility,	486	49	24	25	39	137	43	30	20	.....	20	230	.....	52	50	82	46
Injuries at birth,	110	45	16	16	20	97	8	2	1	.....	1	108	.....	2	.....	.....	.....
External causes,	88	1	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....

*Including infants aged 21 to 29 days.

Malformations,	227	33	13	28	46	120	33	14	7	174	16	8	12	10	7
Premature birth,	572	25	79	42	65	411	67	28	22	528	22	5	3	4	
Conceitual debility,	437	43	20	22	35	120	39	24	17	200	48	46	77	41	25
Injuries at birth,	107	43	16	15	20	91	8	2	1	105	2	6	21	15	10
External causes,	75	1	2	3	4	10	3	3	4	20	3				
Ill defined and unknown,	1						1			1			1	2	
All other causes,	238	5	4	3	17	29	15	14		72	28	26	41	42	29
Philadelphia, (colored),															
All causes,	437	33	19	13	16	81	27	23	13	114	42	45	90	79	57
Measles,	6													2	4
Scarlet fever,															
Whooping cough,	6													3	3
Diphtheria and croup,	1												1		
Influenza,															
Dysentery,															
Erysipelas,	1							1		1					
Tetanus,	1						1			1					
Tuberculosis of the lungs,	5											1	1	3	1
Tuberculous meningitis,	3											1	1	1	
Other forms of tuberculosis,	1														1
Syphilis,	16				2	2	3		1	6		1	6	1	
Meningitis,	2							1		1			1	2	
Convulsions,	5	1			1	1			1	1			1		
Organic diseases of the heart,	2														
Acute bronchitis,	28							1	1	2	1	2	10	8	5
Pneumonia,	27				1	1	1			2	4	7	4	5	5
Bronchopneumonia,	46			1		1	2	2		5	3	2	10	11	15
Diseases of the stomach,	6			1	2	3				3			3	1	
Diarrhoea and enteritis,	138			1	3	3	4	6	5	18	16	23	38	27	15
Malformations,	11	2	5		1	8	1	1		10		1			
Premature birth,	58	22	9	5	2	36	9	1	1	52	3	1	1	1	
Longitudinal debility,	40		4	3	4	17	4	6	3	32	4	4	5	5	1
Injuries at birth,	2	2		1		3				3					
External causes,	13											1	4	3	2
Ill defined and unknown,	27				1	4	2	1		8	3	2	5	4	
All other causes,															
Pittsburgh, (total),	1,812	226	61	59	101	447	105	82	70	704	169	152	337	248	292
All causes,															
Measles,	8				1	1				1				4	3
Scarlet fever,	1														1
Whooping cough,	43							1	1	1	9	4	10	9	10
Diphtheria and croup,	13							1				1	2	2	7
Influenza,	2							1		1			1		

TABLE 10. —Continued.

Cause of Death.	Age, Under One Year, in Completed Days, Weeks or Months.															
	Days.				Weeks.				Months.							
	Under one.	One.	Two.	Three to six.	Under one.	One.	Two.	Three.*	Under one.	One.	Two.	Three to five.	Six to eight.	Nine to eleven.		
Under one year.																
Dysentery,	3															
Erysipelas,	9	1			1	1			3	2					1	2
Tetanus,	4				2				4						3	1
Tuberculosis of the lungs,	4														3	2
Tuberculous meningitis,	7														1	4
Other forms of tuberculosis,	7															2
Syphilis,	24	3			3	1										
Meningitis,	14				2			1	10	3					4	
Convulsions,	45	1	3		12	5		1	20	2					7	6
Organic diseases of the heart,	5				1				1	1					1	1
Acute bronchitis,	55				2	2			6	6						8
Pneumonia,	37				1	2			8	2					16	12
Bronchopneumonia,	194	2	1		6	3		1	25	19					53	7
Diseases of the stomach,	34					5			10	6					42	33
Diarrhoea and enteritis,	555		4		15	20	14	20	69	57	56	163	121	89	3	4
Malformations,	81	14	9	7	37	8	5	3	53	6	4	10	6	2		
Premature birth,	310	26	29	26	235	33	17	16	301	7	2					
Congenital debility,	192	33	12	6	20	61	8	16	99	27	28	23	9	6		
Injuries at birth,	53	28	7	3	47	6			53							
External causes,	18	1	2	1	5				5	1	1	5	2	4		
Ill defined and unknown,	2															
All other causes,	86	1	3	8	12	6	8	4	30	12	11	17	11	5		



BIRTHS.



BIRTHS.

The total number of births (stillbirths excluded) for the year was 204,920. The birth rate per 1,000 of population was 26.2, a slight decrease as compared with the previous year. The rates for the six-year period, 1906-1911, inclusive, were as follows:

1906,	23.4
1907,	24.1
1908,	26.2
1909,	26.1
1910,	26.5
1911,	26.2

The number of living male births was 106,156 and of living female births, 98,764. The births by sex for the different months of the year, by nativity, ages of mothers and number of child of mothers for the rural sections of each county and for each incorporated municipality having more than 5,000 of population are to be found in the following tables.

BIRTH TABLE 1.

Births by sex and month for the entire State and for all Municipalities over 5,000 population, for Groups of Municipalities having less than 5,000 population and for the Rural Sections of each County. (Stillbirths excluded.)

Area.	Total.	Jan.	Feb.	Mar.	April.	May.	June.	July.	Aug.	Sept.	Oct.	Nov.	Dec.
Entire State,	To., ... M., ... F., ...	17,765 9,252 8,513	16,697 8,646 8,051	17,996 9,191 8,805	16,282 8,504 7,778	16,906 8,825 8,081	16,449 8,423 8,026	17,594 9,112 8,482	17,917 9,383 8,534	17,388 8,942 8,446	16,677 8,647 8,030	16,364 8,491 7,873	16,885 8,740 8,145
Total of all municipalities over 5,000 population,	To., ... M., ... F., ...	116,860 60,372 56,488	10,279 5,335 4,944	9,394 4,820 4,574	9,653 4,753 4,900	9,600 4,941 4,659	9,758 4,902 4,676	10,108 5,138 4,970	10,229 5,371 4,858	9,893 5,067 4,826	9,498 4,876 4,622	9,464 4,906 4,558	9,682 5,017 4,665
Total of all municipalities under 5,000 population,	To., ... M., ... F., ...	25,998 13,533 12,465	2,192 1,137 1,055	2,186 1,138 1,048	2,137 1,135 1,012	2,299 1,258 1,041	2,135 1,113 1,018	2,249 1,178 1,071	2,238 1,137 1,081	2,183 1,100 1,083	2,094 1,091 993	2,003 1,028 965	2,113 1,059 1,064
Total rural,	To., ... M., ... F., ...	62,132 32,291 29,841	5,294 2,780 2,514	5,167 2,700 2,467	5,092 2,626 2,466	5,077 2,676 2,401	4,736 2,404 2,332	5,237 2,736 2,501	5,450 2,855 2,595	5,300 2,715 2,594	5,115 2,700 2,415	4,897 2,547 2,350	5,090 2,664 2,426
Allentown,	To., ... M., ... F., ...	1,485 805 680	138 79 59	144 77 67	118 65 53	115 54 61	131 75 56	110 51 59	127 74 53	115 58 57	115 66 49	69 38 31	163 83 80
Altoona,	To., ... M., ... F., ...	1,420 713 707	120 67 53	102 45 57	146 75 71	105 57 48	138 77 61	113 55 58	123 63 60	123 66 57	129 63 66	114 50 64	120 63 57
Ambridge,	To., ... M., ... F., ...	257 152 105	21 12 8	24 12 10	25 13 10	17 9 8	18 9 9	18 9 7	25 11 13	24 14 10	20 15 5	21 15 6	22 11 11
Archbald,	To., ... M., ... F., ...	294 116 108	30 15 15	22 9 13	23 11 12	14 7 1	7 7 7	14 7 7	7 10 11	12 9 3	17 9 8	27 10 17	23 16 7
Ashley,	To., ... M., ... F., ...	193 97 96	16 7 9	15 7 8	25 12 13	18 9 8	14 10 4	15 9 6	12 5 7	11 5 6	11 6 2	8 2 13	15 15 6
Ashland,	To., ... M., ... F., ...	135 86 99	13 8 7	13 5 8	19 8 11	16 7 10	12 3 9	23 16 7	14 7 7	14 7 8	11 7 4	20 11 9	10 2 8

Bangor,	To, ... M., ... F., ...	120 69 51	3 1 2	11 4 7	11 6 5	17 14 3	8 6 2	9 6 3	11 4 7	9 5 4	15 8 7	7 4 3	10 5 5	9 6 3
Beaver Falls,	To, ... M., ... F., ...	349 183 166	24 13 11	30 15 15	31 17 14	27 15 12	34 16 18	27 14 13	27 13 14	37 24 13	29 15 14	26 15 11	30 15 16	27 11 16
Bellevue,	To, ... M., ... F., ...	161 77 84	8 5 3	11 6 5	20 8 12	18 7 11	11 7 4	14 3 11	17 8 9	10 5 5	13 6 5	14 7 5	11 6 5	14 8 9
Berwick,	To, ... M., ... F., ...	166 84 82	12 5 8	11 6 5	17 16 11	18 9 9	11 5 6	15 7 8	16 7 9	16 10 6	10 6 4	8 3 5	11 8 3	20 12 8
Bethlehem,	To, ... M., ... F., ...	319 170 149	39 21 15	22 8 14	27 15 12	23 10 13	23 10 18	16 6 10	30 14 16	26 14 12	26 21 5	33 20 13	30 17 13	19 11 8
Blakely,	To, ... M., ... F., ...	111 56 55	10 3 7	8 5 3	10 4 6	11 5 6	5 1 4	10 5 5	9 7 2	11 6 6	7 4 3	11 6 5	11 6 5	8 5 5
Bloomshurg,	To, ... M., ... F., ...	138 72 66	12 6 6	13 4 9	15 7 8	11 9 2	8 5 3	9 6 3	15 7 7	9 5 4	15 4 11	9 7 5	13 9 4	9 5 4
Braddock,	To, ... M., ... F., ...	817 435 392	93 45 48	72 14 32	76 42 34	55 31 21	78 41 37	64 28 36	75 37 38	69 48 21	72 44 28	71 29 42	71 40 31	51 30 21
Bradford,	To, ... M., ... F., ...	292 166 136	26 15 11	23 12 11	28 14 14	25 18 7	20 7 13	19 12 7	28 15 13	25 15 10	27 16 11	23 23 12	24 17 7	24 14 10
Bristol,	To, ... M., ... F., ...	215 119 96	25 12 13	15 8 7	20 14 6	19 8 11	7 3 4	20 7 13	25 15 10	20 13 7	23 16 7	11 6 5	15 7 8	15 10 5
Butler,	To, ... M., ... F., ...	613 324 289	59 26 33	62 29 33	52 26 26	41 38 13	60 29 31	55 27 27	44 27 15	49 28 28	51 26 23	45 19 19	40 19 21	55 35 29
Carbondale,	To, ... M., ... F., ...	450 232 213	37 17 18	36 17 19	39 15 14	11 20 21	41 20 21	43 26 17	34 21 13	38 24 14	42 20 22	25 23 13	41 23 18	45 25 25
Carlisle,	To, ... M., ... F., ...	213 111 102	16 9 7	17 8 9	18 11 4	14 5 9	19 6 13	18 11 7	22 12 10	20 9 11	18 10 8	15 5 10	18 13 5	18 9 9
Carnegie,	To, ... M., ... F., ...	336 170 166	22 13 9	24 17 13	31 17 14	31 14 14	26 11 15	26 13 13	36 14 22	26 16 10	26 13 13	29 18 11	30 16 13	29 16 13

TABLE 1.—Continued.

Area.	Total.	Jan.	Feb.	Mar.	April.	May.	June.	July.	Aug.	Sept.	Oct.	Nov.	Dec.
Carrick,	To., ... M., ... F., ...	205 109 96	7 4 3	15 6 6	13 7 6	10 4 6	22 12 10	20 13 7	21 11 10	23 10 13	14 9 5	16 9 7	17 9 8
Catsanqua,	To., ... M., ... F., ...	98 59 39	9 6 3	7 3 4	6 3 3	6 5 1	7 5 2	1 1	18 12 6	16 7 9	5 3 2	7 7	9 5 4
Chambersburg,	To., ... M., ... F., ...	315 153 162	26 13 14	27 9 18	27 15 12	25 15 10	29 15 14	23 12 11	24 13 22	25 19 16	22 13 12	21 10 10	24 14 10
Charleoi,	To., ... M., ... F., ...	318 166 152	18 11 14	26 16 10	31 13 18	24 17 7	28 17 11	28 15 13	34 16 18	27 10 17	22 11 11	22 13 14	23 11 12
Chester,	To., ... M., ... F., ...	1,022 507 515	73 36 37	90 50 40	92 41 51	69 33 36	105 54 51	92 39 53	84 40 44	76 33 43	93 42 54	71 39 29	81 47 34
Clearfield,	To., ... M., ... F., ...	179 89 90	13 10 7	13 7 3	12 7 5	16 7 7	14 10 7	25 14 11	15 5 10	15 8 7	8 5 3	15 5 10	11 5 8
Coaldale,	To., ... M., ... F., ...	298 108 100	19 7 12	20 12 8	19 9 10	16 10 6	16 4 12	24 12 12	12 9 3	18 9 9	14 7 7	17 8 9	12 10 2
Coatesville,	To., ... M., ... F., ...	275 149 126	22 12 10	16 7 9	26 16 6	24 14 10	31 17 14	23 14 9	31 12 19	29 18 11	18 5 13	14 8 6	18 13 9
Columbia,	To., ... M., ... F., ...	243 127 116	7 2 5	28 12 16	20 11 9	17 8 6	31 15 16	19 10 9	27 14 13	21 12 9	15 8 7	16 10 6	27 14 13
Connellsville,	To., ... M., ... F., ...	353 197 156	28 14 14	27 16 11	26 16 10	29 13 13	35 18 18	39 22 17	27 20 7	18 11 7	22 16 6	28 18 10	23 17 16
Conshohocken,	To., ... M., ... F., ...	295 104 101	18 8 10	10 6 4	19 12 7	20 10 10	31 11 29	25 13 12	25 17 8	16 5 11	13 8 4	9 5 1	5 4 6

Corapolis,	To,...	175	15	18	18	9	9	18	13	14	14	14	15
	M.,...	98	10	12	8	3	3	12	6	7	5	7	10
Corry,	F.,...	77	5	10	3	6	6	6	7	7	9	7	5
	To,...	105	5	8	10	7	6	13	9	11	7	7	12
Danville,	M.,...	48	2	5	5	2	2	4	6	5	4	2	4
	F.,...	57	3	3	2	5	4	9	3	6	4	5	8
Darby,	To,...	173	17	12	7	17	15	23	14	6	14	14	15
	M.,...	91	6	6	4	10	8	6	8	1	5	7	12
Dickson City,	F.,...	92	11	6	3	7	7	17	6	5	9	7	3
	To,...	156	19	14	11	8	17	10	18	14	19	11	13
Donora,	M.,...	79	9	8	5	4	11	7	10	5	17	7	7
	F.,...	77	10	6	5	4	6	7	8	9	5	4	6
DuBois,	To,...	443	40	39	38	29	25	41	41	42	33	39	41
	M.,...	270	21	23	23	19	14	22	24	22	21	25	21
Dunmore,	F.,...	193	19	16	15	12	10	19	17	20	20	14	20
	To,...	432	40	28	37	33	33	42	42	33	36	38	35
Duryea,	M.,...	194	22	14	13	17	14	23	9	14	17	16	13
	F.,...	238	18	14	24	16	19	26	20	19	19	22	22
Easton,	To,...	356	21	24	26	28	31	28	31	39	36	34	34
	M.,...	180	9	13	12	12	8	12	12	12	25	19	14
Easton,	F.,...	569	47	40	58	49	57	43	46	45	52	45	41
	To,...	289	23	21	21	30	26	24	20	28	27	28	20
Duquesne,	M.,...	280	24	19	37	19	25	19	26	17	25	17	21
	F.,...	606	58	59	58	44	42	45	56	58	59	35	47
Duryea,	To,...	309	30	31	27	27	22	20	19	32	33	18	28
	M.,...	297	28	28	31	17	20	25	26	26	26	17	19
Easton,	F.,...	321	25	26	30	28	25	29	31	26	18	26	42
	To,...	143	12	13	11	13	10	15	10	6	11	16	13
Easton,	M.,...	178	13	13	19	15	12	10	16	12	13	10	29
	F.,...	582	40	42	46	39	45	67	52	48	54	50	48
Edwardsville,	To,...	303	18	23	23	18	28	24	32	35	32	38	25
	M.,...	279	22	19	23	21	17	27	27	27	22	22	23
East Conemaugh,	F.,...	188	11	16	9	7	5	14	19	22	30	18	18
	To,...	102	5	7	5	5	7	10	7	17	16	10	8
East Conemaugh,	M.,...	86	6	9	4	2	7	9	11	6	14	8	10
	F.,...	183	22	16	14	7	16	17	15	21	23	11	12
East Pittsburgh,	To,...	92	12	6	9	4	6	8	7	12	14	7	5
	M.,...	91	11	10	5	3	10	9	8	11	11	4	7
East Pittsburgh,	F.,...	200	19	20	15	24	8	17	20	24	17	10	16
	To,...	113	14	11	12	13	13	8	11	16	12	8	9
East Pittsburgh,	M.,...	81	5	9	3	3	3	9	9	8	5	7	9
	F.,...	81	5	9	3	3	3	9	9	8	5	7	9

TABLE 1.—Continued.

Area.	Total.	Jan.	Feb.	Mar.	April.	May.	June.	July.	Aug.	Sept.	Oct.	Nov.	Dec.
Erle,	1,533	118	120	143	120	136	112	139	124	141	131	147	162
Tb., ...	825	60	67	74	65	70	59	77	61	75	61	79	82
M., ...	768	58	53	69	55	66	58	62	63	66	70	65	83
F., ...													
Elma,	182	27	18	19	13	9	16	16	9	16	16	12	11
Tb., ...	87	14	11	9	6	1	11	9	6	4	8	8	6
M., ...	35	13	7	10	7		5	7	3	12	8	9	6
F., ...													
Forest City,	281	13	18	29	27	28	31	26	25	16	25	26	17
Tb., ...	118	4	10	16	16	13	18	14	16	9	10	10	10
M., ...	136	5	14	10	11	15	16	12	9	7	15	15	7
F., ...													
Franklin,	198	12	10	17	19	19	19	29	16	13	15	13	25
Tb., ...	98	9	6	10	10	10	8	7	6	7	7	4	13
M., ...	100	3	4	7	8	9	11	13	19	6	8	9	12
F., ...													
Freeland,	217	21	17	21	23	24	21	15	15	15	15	18	12
Tb., ...	110	9	9	12	12	16	9	9	7	7	7	6	8
M., ...	107	12	8	9	11	8	12	8	7	8	8	12	4
F., ...													
Greensburg,	335	32	34	19	15	27	20	23	33	21	25	29	27
Tb., ...	152	16	21	11	7	9	12	13	13	9	13	11	17
M., ...	133	16	13	8	8	18	8	10	20	12	12	18	10
F., ...													
Greenville,	140	10	7	22	6	17	14	14	14	7	10	10	9
Tb., ...	68	2	4	12	3	3	5	3	4	3	4	5	5
M., ...	72	7	3	10	3	10	5	6	10	4	4	5	5
F., ...													
Gilberton,	191	16	18	17	18	12	23	19	16	5	10	18	19
Tb., ...	101	10	8	8	9	9	10	13	3	3	3	11	10
M., ...	90	6	10	9	9	4	13	6	8	2	7	7	9
F., ...													
Glassport,	184	20	10	11	11	19	14	21	18	15	20	14	11
Tb., ...	95	10	8	8	4	9	10	10	8	5	9	9	5
M., ...	89	10	2	3	7	10	5	11	8	10	12	5	6
F., ...													
Hanover,	168	16	17	14	15	13	12	14	11	10	17	15	14
Tb., ...	83	9	7	9	5	7	8	9	8	6	7	4	6
M., ...	83	7	10	5	10	6	4	5	3	4	10	11	8
F., ...													
Harrisburg,	1,326	129	101	109	92	110	110	131	109	125	107	109	103
Tb., ...	771	71	52	50	43	54	55	61	58	59	54	54	43
M., ...	651	58	49	59	43	56	53	67	51	66	53	57	60
F., ...	672	53	49	59	43	56	53	67	51	66	53	57	60

Hazleton,	To., ... M., ... F., ...	787 405 382	59 27 32	56 22 34	58 31 32	66 34 32	67 33 34	70 36 34	76 38 38	78 32 40	58 28 22	61 31 27	78 41 37	66 28 28
Homestead,	To., ... M., ... F., ...	701 353 346	58 29 29	51 22 29	68 43 25	45 23 22	55 26 29	67 31 36	65 34 31	61 32 32	68 26 30	51 25 25	54 31 31	58 27 31
Huntingdon,	To., ... M., ... F., ...	115 54 61	4 1 2	2 1 1	5 3 2	13 10 3	11 5 6	11 6 5	10 5 5	12 2 8	12 5 7	12 5 7	14 10 10	11 6 5
Indiana,	To., ... M., ... F., ...	109 57 52	17 11 6	9 4 5	10 5 5	13 8 5	14 4 10	5 2 3	3 2 2	8 6 2	5 2 2	6 6	14 10 4	5 3 2
Jeannette,	To., ... M., ... F., ...	255 111 144	23 12 11	10 5 5	19 10 9	18 7 11	22 8 14	24 16 16	21 14 14	25 10 15	22 15 17	18 8 10	20 11 9	23 10 13
Jersey Shore,	To., ... M., ... F., ...	111 59 52	10 6 4	11 6 6	16 5 11	7 5 2	7 3 4	8 5 3	6 4 2	12 9 3	8 3 5	9 3 3	7 3 3	10 4 6
Johnstown,	To., ... M., ... F., ...	1,798 883 795	156 86 70	147 84 63	142 74 68	117 63 54	161 80 81	143 79 64	165 88 77	140 82 58	136 73 63	148 77 71	135 69 66	138 78 60
Junata,	To., ... M., ... F., ...	191 97 94	13 7 6	14 8 6	19 7 12	19 15 4	14 5 9	15 9 6	13 9 4	20 9 1	18 8 10	14 5 9	11 3 8	20 12 8
Kaue,	To., ... M., ... F., ...	177 71 106	14 5 9	19 5 14	18 10 8	10 4 6	19 9 10	13 4 9	6 5 11	7 3 3	7 1 10	14 7 7	10 3 7	20 9 11
Kingston,	To., ... M., ... F., ...	172 82 80	8 6 2	9 4 5	17 10 7	14 10 4	9 5 4	8 4 4	20 15 14	15 12 3	21 10 11	10 7 3	19 9 10	22 9 13
Knoxville,	To., ... M., ... F., ...	114 59 55	14 7 7	9 6 3	5 1 4	13 9 4	4 2 2	9 6 3	9 4 5	11 5 6	9 4 5	9 4 5	7 4 3	15 7 8
Lancaster,	To., ... M., ... F., ...	1,005 514 491	81 48 33	76 41 35	85 35 50	84 44 40	74 36 38	90 50 40	80 42 38	71 34 37	92 40 43	92 34 33	87 52 43	91 42 49
Lansford,	To., ... M., ... F., ...	322 155 147	19 10 9	33 19 14	31 15 16	27 12 15	18 10 8	25 16 9	27 14 13	36 22 14	32 14 19	26 16 10	18 11 11	29 18 11
Larksville,	To., ... M., ... F., ...	289 158 131	25 10 15	24 14 10	27 14 13	14 10 4	21 9 12	24 12 12	19 13 6	31 20 11	35 20 15	35 20 15	19 13 6	15 8 7

TABLE I.—Continued.

Area.	Total.	Jan.	Feb.	Mar.	April.	May.	June.	July.	Aug.	Sept.	Oct.	Nov.	Dec.
Lafayette, To,...	254	23	18	23	18	20	16	18	36	18	16	21	27
Lafayette, M.,...	118	10	7	15	6	9	6	11	15	7	6	15	11
Lafayette, F.,...	136	13	11	8	12	11	10	7	21	11	6	6	16
Lafayette, To,...	425	50	49	30	38	31	28	35	29	25	29	46	33
Lafayette, M.,...	217	24	21	14	23	17	11	18	17	17	14	21	29
Lafayette, F.,...	208	26	28	16	15	17	17	17	12	8	15	25	13
Lafayette, To,...	115	8	9	5	8	8	14	9	7	12	16	12	7
Lafayette, M.,...	63	1	6	1	5	3	7	5	5	4	5	4	6
Lafayette, F.,...	52	1	3	4	3	5	7	4	2	7	7	8	1
Lewistown, To,...	231	26	26	13	19	21	17	21	19	17	21	17	17
Lewistown, M.,...	119	15	11	7	13	7	11	11	8	7	10	7	9
Lewistown, F.,...	115	11	12	6	6	14	6	10	11	10	11	10	8
Lock Haven, To,...	171	18	13	13	15	19	9	16	21	10	9	19	9
Lock Haven, M.,...	53	13	7	6	8	8	7	5	10	8	3	12	6
Lock Haven, F.,...	78	5	6	7	7	11	2	11	2	2	6	7	3
Luzerne, To,...	149	14	15	12	13	13	9	18	12	12	12	9	9
Luzerne, M.,...	86	8	9	5	7	9	5	10	7	7	5	6	6
Luzerne, F.,...	63	6	6	7	6	4	4	8	6	7	3	8	3
McKeesport, To,...	1,392	125	120	126	114	128	102	111	106	127	115	95	113
McKeesport, M.,...	723	72	66	61	70	61	47	57	56	71	62	45	55
McKeesport, F.,...	669	53	54	65	44	67	55	54	50	56	53	50	58
McKees Rocks, To,...	653	72	58	59	32	60	62	50	55	48	57	63	37
McKees Rocks, M.,...	349	36	29	37	17	34	35	29	28	21	21	32	19
McKees Rocks, F.,...	304	36	29	22	15	26	27	21	27	27	25	31	18
Mahanoy City, To,...	504	39	36	44	65	33	35	45	56	36	32	47	36
Mahanoy City, M.,...	278	22	19	29	31	18	18	21	33	20	17	25	21
Mahanoy City, F.,...	228	17	17	15	34	13	17	21	23	16	15	22	15
Meadville, To,...	260	17	29	29	21	20	19	11	24	20	27	29	14
Meadville, M.,...	131	9	15	14	11	9	9	11	11	11	12	19	7
Meadville, F.,...	126	8	14	15	10	11	10	6	13	7	15	10	7
Middletown, To,...	189	17	15	15	10	11	10	8	19	8	10	8	8
Middletown, M.,...	72	11	6	10	6	3	3	3	14	3	2	7	4
Middletown, F.,...	67	6	9	5	4	8	7	5	5	5	3	1	4

Monessen,	To., ... M., ... F., ...	632 312 320	67 34 33	44 26 18	57 27 30	29 11 18	58 28 30	42 16 16	54 27 27	67 29 38	39 17 22	64 32 32	61 32 29	50 23 18
Milvale,	To., ... M., ... F., ...	222 120 102	20 7 13	13 7 6	20 9 9	17 6 11	16 11 5	16 10 6	24 17 7	24 15 9	15 6 9	20 13 7	19 10 10	18 8 10
Milton,	To., ... M., ... F., ...	165 98 67	15 5 10	9 6 3	19 13 7	11 5 6	15 8 7	15 7 8	18 12 6	7 6 1	18 12 6	17 13 4	12 5 5	9 4 4
Mineersville,	To., ... M., ... F., ...	276 150 126	19 7 13	23 16 7	27 16 11	18 12 7	20 12 8	15 7 8	28 15 13	29 13 16	23 15 8	24 14 10	26 12 14	24 14 14
Monongahela,	To., ... M., ... F., ...	269 156 104	24 13 11	26 17 9	20 10 10	23 16 7	18 9 9	17 11 6	15 12 7	19 12 7	23 16 7	21 15 6	29 15 14	21 10 11
Mount Carmel,	To., ... M., ... F., ...	630 300 330	52 27 25	47 25 22	54 31 23	54 25 29	55 28 27	43 16 27	52 22 30	61 21 40	39 20 19	51 27 24	64 23 29	58 23 29
Mount Pleasant,	To., ... M., ... F., ...	162 86 46	12 8 4	9 4 5	19 11 7	13 12 11	10 6 4	19 11 8	8 4 4	15 10 5	14 8 6	13 8 5	15 8 7	15 5 10
Munhall,	To., ... M., ... F., ...	212 115 97	13 7 6	18 11 7	23 11 13	23 11 8	21 11 10	16 11 5	23 12 11	17 10 7	9 4 5	20 9 11	17 9 8	15 9 6
Nanticoke,	To., ... M., ... F., ...	617 300 317	64 28 36	59 36 33	65 36 29	37 18 19	65 31 34	48 23 25	53 30 22	42 20 22	37 16 21	39 18 21	58 25 33	50 29 9
New Brighton,	To., ... M., ... F., ...	231 124 110	15 9 6	23 11 12	26 11 15	15 11 4	17 5 12	9 5 4	26 14 12	27 13 14	21 12 9	16 7 7	14 9 5	22 12 10
New Castle,	To., ... M., ... F., ...	1,175 596 579	93 47 47	102 54 46	103 53 49	91 48 43	99 50 49	84 28 46	124 70 54	88 47 41	92 45 47	119 57 62	84 41 43	95 43 52
New Kensington,	To., ... M., ... F., ...	315 145 170	21 13 8	26 10 16	39 21 18	28 16 12	15 7 8	21 9 15	19 17 12	28 11 20	38 19 19	28 11 17	13 5 5	36 16 20
Norristown,	To., ... M., ... F., ...	578 299 279	41 19 22	53 26 27	37 23 14	43 22 31	56 25 31	47 27 20	64 34 30	48 24 21	69 33 34	39 23 16	37 19 16	46 22 24
North Braddock,	To., ... M., ... F., ...	430 214 216	46 28 18	41 23 18	36 13 23	37 16 21	39 16 23	31 11 23	39 18 21	30 18 12	38 20 18	31 12 19	38 22 16	21 17 4

TABLE 1. —Continued.

Area.	Total.	Jan.	Feb.	Mar.	April.	May.	June.	July.	Aug.	Sept.	Oct.	Nov.	Dec.
Northampton, To,...	433	33	33	42	39	36	30	28	32	41	38	36	40
M.,...	232	10	20	24	20	26	15	15	16	19	23	24	19
F.,...	201	28	13	18	19	10	15	12	16	22	15	12	21
Oil City, To,...	362	39	21	28	24	32	29	45	38	27	23	29	27
M.,...	187	19	11	16	11	13	15	15	26	19	12	13	14
F.,...	175	20	10	12	13	19	14	19	19	9	11	16	13
Old Forge, To,...	613	60	50	53	58	40	38	44	73	61	43	45	48
M.,...	290	32	31	29	32	17	28	23	27	31	22	19	25
F.,...	323	28	29	28	26	23	20	23	46	26	21	26	23
Olyphant, To,...	276	25	29	21	15	20	21	36	22	17	27	24	18
M.,...	153	13	13	11	6	14	13	23	14	9	17	17	8
F.,...	120	14	16	10	9	6	8	13	9	8	10	7	10
Philadelphia, To,...	39,811	3,545	3,171	3,337	3,061	3,295	3,307	3,434	3,470	5,380	3,289	3,279	3,243
M.,...	20,475	1,833	1,633	1,691	1,590	1,706	1,679	1,789	1,834	1,726	1,677	1,690	1,677
F.,...	19,336	1,712	1,538	1,646	1,471	1,589	1,628	1,695	1,636	1,654	1,612	1,589	1,566
Phoenixville, To,...	291	18	21	23	17	23	26	35	30	26	24	24	24
M.,...	140	10	8	13	9	12	14	12	14	13	13	11	11
F.,...	151	8	13	10	8	11	12	23	16	13	13	11	13
Pittsburgh, To,...	15,373	1,355	1,219	1,282	1,222	1,291	1,244	1,278	1,404	1,308	1,215	1,266	1,289
M.,...	8,631	724	602	634	608	686	667	682	774	661	626	682	685
F.,...	7,352	631	617	623	614	605	577	596	630	647	589	604	594
Pittston, To,...	570	43	42	48	45	38	50	54	41	50	53	46	60
M.,...	314	21	19	30	26	21	31	27	15	29	28	31	32
F.,...	256	24	23	18	19	17	19	27	25	21	25	15	28
Plymouth, To,...	592	51	60	50	51	50	37	47	52	40	57	47	50
M.,...	329	27	37	27	30	28	21	31	23	21	31	25	24
F.,...	263	24	23	23	21	22	16	15	28	17	26	22	26
Pottsville, To,...	516	49	48	47	48	37	31	50	43	37	36	33	37
M.,...	281	27	25	23	31	24	17	33	26	23	21	15	16
F.,...	235	22	23	24	17	13	14	17	37	14	15	13	21
Pottstown, To,...	355	26	32	26	25	37	27	34	27	23	31	37	30
M.,...	178	12	15	11	8	17	12	16	15	13	20	21	21
F.,...	177	14	17	15	17	20	15	18	12	13	11	14	9

Punxsutawney,	To, ... M., ... F., ...	224 116 108	20 5 15	19 9 10	23 15 8	14 10 4	18 11 7	23 15 12	19 9 10	16 13 8	21 13 8	13 8 5	15 7
Rankin,	To, ... M., ... F., ...	305 161 144	27 11 16	21 11 10	24 10 14	25 16 9	28 8 12	18 8 10	29 19 13	31 18 13	26 11 13	24 13 11	25 13 12
Reading,	To, ... M., ... F., ...	2,256 1,226 1,130	220 127 103	194 98 96	308 122 86	177 115 62	190 88 102	178 85 93	182 90 93	221 104 108	299 104 105	171 85 86	213 114 99
Rochester,	To, ... M., ... F., ...	172 81 91	12 6 6	14 6 8	23 11 12	12 4 8	18 11 6	16 8 8	15 7 8	14 5 9	16 6 7	12 6 6	10 5 5
Ridgway,	To, ... M., ... F., ...	152 81 71	13 7 6	7 4 3	15 10 5	15 8 7	11 2 9	10 2 8	17 10 7	11 8 3	12 7 5	14 5 5	16 9 7
St. Clair, Allegheny county,	To, ... M., ... F., ...	452 322 70	17 9 8	12 3 9	15 9 6	13 6 7	14 9 5	10 2 2	16 8 8	8 4 4	13 10 4	10 6 4	9 4 5
St. Marys,	To, ... M., ... F., ...	215 114 101	16 7 9	14 8 6	27 15 12	14 8 6	22 16 6	22 19 13	19 10 9	24 12 5	20 8 12	13 6 7	11 7 4
Sayre,	To, ... M., ... F., ...	170 90 80	13 5 8	7 3 4	9 4 5	21 15 6	10 3 7	15 6 9	13 11 2	14 4 10	15 11 4	16 6 9	18 9 9
Scranton,	To, ... M., ... F., ...	3,666 1,904 1,762	267 136 131	292 150 142	329 166 163	262 151 111	297 159 138	324 174 150	337 191 146	308 159 149	302 153 159	394 146 158	308 153 155
Scottsdale,	To, ... M., ... F., ...	167 83 83	17 7 10	16 7 9	15 6 9	12 3 3	5 2 3	17 8 8	16 10 6	22 11 5	10 5 9	13 9 4	8 6 1
St. Clair, Schuylkill county,	To, ... M., ... F., ...	242 123 119	18 11 7	21 14 7	18 8 10	18 9 9	17 7 10	21 10 11	23 13 14	23 8 6	16 8 8	22 14 9	23 10 13
Shamokin,	To, ... M., ... F., ...	560 274 286	53 23 30	43 25 18	52 28 24	40 20 20	46 25 18	58 25 37	44 25 25	50 18 19	37 23 15	51 23 28	51 23 33
Sharon,	To, ... M., ... F., ...	397 194 263	38 19 14	36 22 17	37 20 17	33 17 16	34 13 21	27 12 16	46 21 25	31 14 20	27 13 13	26 11 15	25 12 12
Sharpsburg,	To, ... M., ... F., ...	261 141 120	30 19 11	20 4 6	21 12 9	22 11 11	19 9 10	24 13 11	23 13 10	28 13 13	15 8 7	26 12 14	27 16 11

TABLE 1.—Continued.

Area.	Total.	Jan.	Feb.	Mar.	April.	May.	June.	July.	Aug.	Sept.	Oct.	Nov.	Dec.
Shenandoah,	886 455 431	86 41 45	74 38 36	71 37 34	67 37 30	63 33 30	60 32 28	86 42 35	82 41 39	86 43 43	83 41 36	90 48 42	58 27 31
South Bethlehem,	868 434 432	84 45 39	73 37 36	75 38 39	63 28 35	59 28 28	56 24 24	79 43 36	66 33 33	72 33 39	78 40 41	83 40 43	78 37 41
Steelton,	427 214 213	42 26 16	38 22 16	45 21 24	27 14 13	37 20 17	32 15 17	47 21 26	34 13 13	29 16 16	35 23 13	27 12 13	34 15 19
Sunbury,	398 173 165	32 16 16	26 16 16	37 19 18	23 13 10	35 14 21	23 12 11	23 12 11	27 12 15	23 15 8	21 12 12	31 16 15	27 19 8
Swissvale,	293 110 113	21 10 11	15 12 7	18 8 10	16 9 7	17 10 7	25 14 11	17 8 9	21 13 8	20 13 13	14 7 9	17 11 11	18 8 10
Swyersville,	277 108 109	31 23 8	18 10 8	30 17 13	26 17 9	22 13 9	20 10 10	11 7 4	22 17 5	17 6 11	20 13 5	32 22 10	28 11 17
South Sharon,	255 135 120	26 13 13	14 7 7	20 11 9	20 11 9	19 8 11	27 14 13	20 10 10	27 14 13	31 14 17	21 11 10	11 8 3	19 14 5
Tamaqua,	284 141 143	25 12 13	20 9 15	32 17 13	31 14 17	28 12 16	25 12 13	18 8 10	21 12 9	13 9 4	19 14 11	27 10 17	25 16 9
Tarentum,	242 141 101	24 16 8	19 9 10	28 15 13	14 9 5	17 10 7	33 16 17	18 9 9	17 12 5	26 16 9	16 10 6	10 6 4	20 12 8
Taylor,	282 145 137	21 9 12	21 11 10	19 9 10	13 8 5	28 16 12	31 16 15	26 15 11	25 8 17	29 18 11	27 11 16	21 15 6	21 9 12
Throop,	225 105 120	17 7 10	19 8 11	22 9 13	24 15 9	23 13 10	26 13 13	13 9 8	9 5 6	23 13 14	17 13 8	18 9 10	14 6 8

Titusville,	To., ... M., ... F., ...	129 63 57	11 6 5	8 5 3	13 8 9	7 4 3	7 9 4	18 9 9	8 4 4	9 5 4	11 5 6	6 2 4	16 10 6
Tyrone,	To., ... M., ... F., ...	196 49 97	16 7 9	11 5 6	18 9 9	19 10 9	10 8 7	14 10 9	14 6 8	23 12 11	22 9 13	18 6 6	20 13 7
Uniontown,	To., ... M., ... F., ...	348 183 165	26 7 19	29 16 13	24 14 10	26 13 13	28 14 14	34 22 12	35 20 15	25 14 12	25 14 11	25 14 13	32 19 19
Warren,	To., ... M., ... F., ...	257 136 121	23 16 7	20 11 9	26 11 15	21 9 12	20 9 11	25 11 11	27 12 15	15 11 4	25 8 8	18 10 7	22 11 11
Washington,	To., ... M., ... F., ...	488 246 242	50 37 33	45 27 18	43 26 17	34 17 17	40 20 20	45 19 26	41 21 20	40 16 24	42 23 19	37 13 15	37 19 18
Waynesboro,	To., ... M., ... F., ...	503 91 169	20 9 11	20 11 9	17 4 13	14 6 8	10 5 5	12 9 9	17 5 5	16 9 9	22 15 9	17 7 10	22 14 14
West Berwick,	To., ... M., ... F., ...	209 106 103	19 11 8	21 17 4	24 15 9	21 6 15	26 10 16	13 3 10	12 6 6	16 11 5	22 11 11	11 5 4	18 9 9
West Chester,	To., ... M., ... F., ...	206 110 96	24 11 13	17 8 9	9 6 3	8 4 4	13 7 6	16 10 6	17 8 9	22 14 8	21 12 13	21 6 15	21 15 6
West Pittston,	To., ... M., ... F., ...	110 52 38	15 4 11	6 5 1	11 6 5	6 2 4	6 4 2	10 8 2	8 4 4	13 5 8	13 6 6	9 3 5	5 1 4
Wilkes-Barre,	To., ... M., ... F., ...	1,909 937 972	145 75 70	155 69 86	188 82 105	136 56 70	197 107 92	173 71 82	141 61 61	186 83 103	171 79 92	155 70 68	152 82 70
Wilkesburg,	To., ... M., ... F., ...	546 288 258	35 21 11	50 30 20	45 17 24	50 26 24	43 21 22	40 20 20	52 32 29	38 23 15	37 17 20	50 24 27	61 31 30
Williamsport,	To., ... M., ... F., ...	703 361 342	76 44 32	67 35 32	61 27 31	52 27 25	66 28 38	42 15 15	67 40 27	52 26 26	52 20 21	63 33 32	48 25 23
Wilmerding,	To., ... M., ... F., ...	249 143 106	18 7 11	21 15 6	21 13 8	24 16 8	21 12 9	19 10 7	24 12 12	15 10 5	25 11 11	22 10 7	20 16 10
Windber,	To., ... M., ... F., ...	388 215 173	43 25 17	29 11 15	38 14 18	34 21 13	28 13 13	32 18 14	26 19 7	31 17 11	23 16 6	40 18 22	38 13 18

TABLE 1 —Continued.

Area.	Total.	Jan.	Feb.	Mar.	April.	May.	June.	July.	Aug.	Sept.	Oct.	Nov.	Dec.
Winton,	To., ... M., ... F., ...	29 9 11	17 11 6	28 11 17	23 10 13	27 14 13	34 13 21	21 11 10	20 10 10	25 20 5	17 9 8	26 18 8	29 11 18
York,	To., ... M., ... F., ...	55 42 53	82 35 47	85 45 40	84 41 43	82 51 31	86 42 41	104 49 55	92 48 41	99 47 52	71 38 33	82 43 39	84 46 38
Counties—Rural.													
Adams,	To., ... M., ... F., ...	41 25 19	40 20 20	43 25 18	34 25 9	51 24 27	31 17 14	46 24 22	48 25 23	66 31 35	48 30 18	27 16 11	47 24 23
Allegheny,	To., ... M., ... F., ...	416 2,421 2,439	376 2,220 196	367 2,203 166	346 194 152	350 186 164	339 173 166	436 233 203	446 231 215	408 202 206	371 193 178	344 185 149	361 190 171
Armstrong,	To., ... M., ... F., ...	100 60 40	92 51 41	114 53 61	113 47 66	92 45 47	90 42 48	83 47 36	104 53 51	101 50 50	122 51 52	84 40 44	102 52 50
Beaver,	To., ... M., ... F., ...	42 17 25	39 17 22	47 22 25	51 23 23	42 13 23	38 13 22	37 21 16	48 26 22	43 24 19	44 22 22	32 15 17	36 23 13
Bedford,	To., ... M., ... F., ...	67 38 29	49 26 23	68 25 33	43 23 30	47 21 26	55 21 32	41 23 19	60 39 21	66 31 35	63 31 32	37 22 15	58 31 27
Blair,	To., ... M., ... F., ...	51 30 21	61 31 30	74 36 38	67 30 37	77 40 37	64 39 25	86 46 37	65 37 28	61 38 33	50 28 22	66 36 30	75 40 35
Bradford,	To., ... M., ... F., ...	48 27 21	59 26 33	55 26 29	47 30 17	48 29 19	57 29 30	56 30 26	67 31 33	54 30 24	55 30 23	37 25 23	50 25 25
Berks,	To., ... M., ... F., ...	120 583 736	142 71 63	131 61 70	129 69 60	117 68 49	134 62 62	146 81 65	161 88 73	134 68 68	134 63 71	127 73 54	124 72 52
Bucks,	To., ... M., ... F., ...	89 39 41	80 29 35	85 41 43	80 38 42	71 33 38	70 30 40	77 41 36	70 28 42	72 34 38	75 33 42	68 38 30	55 25 30

Butler,	To., ... M., ... F., ...	1,022 481 541	75 34 41	102 54 48	9 48 49	83 45 38	92 48 44	76 36 40	91 39 52	81 39 42	101 59 59	70 32 38	80 36 44
Cambria,	To., ... M., ... F., ...	1,980 1,031 919	199 79 90	169 103 90	134 103 91	173 101 72	140 82 58	141 69 72	185 88 97	148 76 86	155 79 61	155 61 69	173 84 84
Cameron,	To., ... M., ... F., ...	68 34 34	5 3 2	9 5 4	4 2 4	5 4 1	8 3 5	4 2 2	5 3 3	7 3 3	8 4 4	3 3 3	8 5 3
Carlton,	To., ... M., ... F., ...	723 387 336	51 28 23	64 21 30	56 21 26	61 22 23	61 27 34	56 30 26	72 27 35	65 29 23	81 30 32	60 25 23	61 28 32
Centre,	To., ... M., ... F., ...	801 405 399	48 22 26	77 46 31	73 26 47	53 28 25	79 39 40	65 30 30	78 35 38	69 31 38	59 31 28	69 39 30	69 39 30
Chester,	To., ... M., ... F., ...	1,176 603 573	100 39 61	84 51 33	102 53 49	106 53 53	102 46 56	97 45 52	114 59 55	116 60 56	86 41 29	75 47 34	94 47 48
Clarion,	To., ... M., ... F., ...	628 342 286	48 22 26	68 43 25	51 25 26	53 32 21	37 19 18	46 29 17	52 27 25	55 32 33	66 41 22	43 21 22	61 35 26
Clearfield,	To., ... M., ... F., ...	1,905 1,098 907	189 108 89	148 78 72	213 111 97	151 83 86	182 85 67	185 81 74	185 74 61	170 88 82	177 84 93	150 72 77	168 82 77
Clinton,	To., ... M., ... F., ...	349 132 107	28 11 17	28 19 9	41 23 18	30 17 13	37 17 29	19 7 12	28 11 17	26 11 15	29 11 15	36 21 15	22 12 10
Columbia,	To., ... M., ... F., ...	528 249 279	55 28 27	42 21 21	60 26 34	45 25 20	46 26 20	44 25 26	46 25 21	40 18 22	48 19 29	39 11 19	32 13 22
Crawford,	To., ... M., ... F., ...	522 278 244	50 32 18	36 20 16	65 36 29	39 19 20	35 17 18	38 26 12	43 29 21	43 24 19	43 21 21	46 26 20	35 12 25
Cumberland,	To., ... M., ... F., ...	576 314 262	53 21 18	47 21 26	38 21 17	43 22 21	54 27 27	43 21 19	55 26 19	49 25 24	45 26 19	50 21 16	47 25 25
Dauphin,	To., ... M., ... F., ...	874 469 405	82 40 42	80 47 33	73 34 39	65 35 30	76 48 28	54 25 29	70 39 31	69 42 27	76 49 27	82 35 47	78 31 38
Delaware,	To., ... M., ... F., ...	678 347 321	54 31 23	63 31 26	72 35 37	54 30 24	54 30 24	51 30 21	44 29 21	71 38 33	48 28 25	58 36 30	50 26 29

TABLE 1.—Continued.

Area.	Total.	Jan.	Feb.	Mar.	April.	May.	June.	July.	Aug.	Sept.	Oct.	Nov.	Dec.
Blk. To, ... M., ... F., ...	631 317 314	55 23 26	42 22 26	57 28 29	48 25 23	63 30 29	51 29 25	41 19 22	62 19 26	55 26 27	46 24 27	47 23 27	61 34 27
Erie. To, ... M., ... F., ...	553 267 286	49 24 25	48 23 25	46 20 26	47 23 24	49 27 22	46 22 24	45 19 26	41 19 22	47 23 24	52 19 33	42 22 20	41 26 15
Fayette. To, ... M., ... F., ...	3,455 1,832 1,623	329 190 139	264 135 139	299 152 147	282 146 136	297 131 136	232 131 109	257 151 116	324 151 159	301 154 143	283 154 129	316 165 151	291 162 129
Forest. To, ... M., ... F., ...	221 120 101	19 13 6	22 9 13	34 16 18	14 5 9	11 4 7	13 9 4	20 12 8	19 13 6	16 7 9	21 13 8	16 11 8	16 11 5
Franklin. To, ... M., ... F., ...	887 414 473	81 44 37	88 41 48	79 36 43	65 30 35	76 51 25	70 51 33	65 37 29	86 37 49	65 41 24	84 38 46	49 25 24	79 43 36
Fulton. To, ... M., ... F., ...	242 127 115	21 10 11	23 15 8	18 12 6	19 11 8	30 15 15	16 9 9	19 7 11	16 8 8	25 16 9	13 5 8	29 14 15	13 6 7
Greene. To, ... M., ... F., ...	364 179 185	30 12 18	24 10 14	29 14 15	33 16 17	28 17 11	35 13 22	18 10 8	31 14 17	35 14 18	37 21 16	33 17 15	31 17 14
Huntingdon. To, ... M., ... F., ...	455 225 230	38 24 14	49 17 32	41 18 26	31 12 19	36 17 19	29 12 17	30 12 13	46 27 19	52 31 21	45 20 25	28 14 14	27 15 12
Indiana. To, ... M., ... F., ...	1,609 882 807	154 88 86	117 53 64	151 81 70	117 64 53	133 72 61	132 69 63	148 79 69	158 83 75	131 57 74	139 75 64	150 90 60	139 71 68
Jefferson. To, ... M., ... F., ...	1,247 667 580	111 64 57	91 55 36	135 83 52	124 69 55	103 57 46	88 41 47	103 55 48	75 41 34	105 55 50	125 61 61	82 44 38	105 49 56
Juniata. To, ... M., ... F., ...	278 144 134	21 10 13	19 8 9	27 13 14	31 12 19	25 13 6	29 18 11	28 12 16	15 9 6	16 9 9	24 15 9	17 10 7	26 11 15

Lackawanna,	To, ... M., ... F., ...	45 19 26	586 288 268	44 22 22	60 28 32	53 25 28	59 33 26	44 23 21	33 29 13	63 37 26	42 17 25	57 28 29	52 20 32	34 16 18
Lancaster,	To, ... M., ... F., ...	150 81 69	2,074 1,061 1,023	168 93 75	184 96 88	163 77 86	194 98 96	152 75 77	188 94 94	167 88 79	176 77 99	173 82 82	174 92 82	185 89 96
Lawrence,	To, ... M., ... F., ...	46 22 24	574 268 276	59 28 31	52 30 22	34 14 20	52 27 25	40 20 24	43 19 24	70 41 25	46 36 24	49 56 22	43 21 22	40 28 12
Lebanon,	To, ... M., ... F., ...	98 40 40	907 491 410	81 48 29	88 48 40	68 25 43	71 30 40	88 47 41	75 39 26	75 49 36	77 36 41	86 42 44	81 47 34	79 43 36
Lehigh,	To, ... M., ... F., ...	71 37 34	1,081 565 516	89 41 39	91 51 40	85 50 35	91 46 45	81 37 44	95 51 44	82 37 45	85 49 36	90 49 41	133 63 70	97 54 43
Luzerne,	To, ... M., ... F., ...	215 123 92	2,085 1,494 1,191	233 130 103	266 145 121	224 118 106	219 118 101	218 116 102	232 132 109	220 122 98	215 132 103	265 135 80	231 124 110	204 129 75
Lycoming,	To, ... M., ... F., ...	51 29 25	536 286 310	52 27 25	64 23 41	57 26 31	45 24 21	44 23 21	45 24 21	45 22 23	48 36 36	46 34 32	42 26 16	57 30 27
McKean,	To, ... M., ... F., ...	31 12 15	419 216 203	25 12 13	40 21 19	41 21 20	35 23 12	43 18 25	32 17 15	43 23 20	41 20 21	25 15 10	36 17 19	27 13 14
Mercer,	To, ... M., ... F., ...	38 20 18	532 295 237	41 27 14	47 25 22	46 28 18	43 27 16	52 29 23	45 26 19	52 32 20	34 19 15	44 21 23	41 25 25	49 25 24
Mifflin,	To, ... M., ... F., ...	45 26 19	501 253 248	45 26 19	49 24 25	32 21 11	42 18 17	34 17 17	50 29 30	53 35 18	40 19 21	35 20 17	45 29 25	36 19 17
Monroe,	To, ... M., ... F., ...	26 12 14	334 165 169	28 17 11	32 13 15	28 18 10	28 14 14	24 13 11	27 13 12	22 12 10	32 15 10	32 16 22	27 12 15	28 14 14
Montgomery,	To, ... M., ... F., ...	137 68 65	1,790 892 868	140 68 72	156 69 87	138 52 86	129 57 72	122 61 61	167 84 83	148 75 73	146 77 69	126 67 59	157 82 75	134 68 66
Montour,	To, ... M., ... F., ...	10 - 5	128 76 52	13 10 3	10 8 2	9 4 5	16 9 7	8 5 3	13 6 7	8 7 1	14 7 7	10 4 6	5 4 1	12 7 5
Northampton,	To, ... M., ... F., ...	54 33 21	912 475 437	76 44 32	71 40 31	80 38 42	86 47 35	77 43 34	85 48 42	92 50 42	81 39 40	67 39 28	76 30 46	67 27 40

TABLE 1.—Continued.

Area.	Total.	Jan.	Feb.	Mar.	April.	May.	June.	July.	Aug.	Sept.	Oct.	Nov.	Dec.
Northumberland,	To., ... M., ... F., ...	107 69 47	111 64 47	129 62 67	127 66 61	121 73 48	114 57 57	123 62 52	103 69 43	127 62 65	115 55 60	119 62 57	110 55 55
Perry,	To., ... M., ... F., ...	377 195 182	321 191 13	31 16 15	40 19 21	32 16 16	28 11 17	26 11 12	41 21 20	27 16 11	26 15 11	26 15 11	30 14 16
Pike,	To., ... M., ... F., ...	82 41 41	8 6 4	4 2 2	11 4 7	8 4 4	5 5	6 2 4	8 2 4	6	6 2 2	11 6 5	5 3 2
Potter,	To., ... M., ... F., ...	223 157 16	23 10 8	17 9 16	33 17 13	22 12 10	24 15 9	31 15 16	44 20 24	18 12 6	20 10 10	23 10 16	31 16 15
Schuylkill,	To., ... M., ... F., ...	2,021 1,361 556	182 100 83	182 82 100	164 90 74	154 76 78	176 93 83	171 82 89	168 92 76	158 79 79	174 98 76	159 87 72	165 86 79
Snyder,	To., ... M., ... F., ...	370 184 166	26 10 10	37 13 13	34 20 17	29 19 15	29 13 10	33 19 14	33 14 11	35 17 18	22 17 8	22 14 19	19 4 15
Somerset,	To., ... M., ... F., ...	1,160 660 560	96 49 47	97 61 36	100 49 51	112 54 53	80 39 41	94 44 50	92 46 46	101 50 50	100 59 41	106 51 55	103 49 49
Sullivan,	To., ... M., ... F., ...	287 152 135	20 11 9	27 14 16	37 17 23	22 15 7	32 16 16	21 8 13	28 17 11	18 13 5	19 12 7	18 11 7	19 7 12
Susquehanna,	To., ... M., ... F., ...	276 199 177	29 16 13	32 18 14	35 20 15	33 17 19	19 10 9	29 21 18	27 14 13	34 21 13	35 21 20	38 21 17	21 12 9
Tioga,	To., ... M., ... F., ...	619 323 296	39 17 22	57 29 28	60 27 33	70 31 32	38 17 21	53 26 27	55 29 26	50 21 21	52 30 22	47 26 21	47 23 24
Union,	To., ... M., ... F., ...	232 115 117	22 14 8	25 13 12	8 5 3	14 13 8	22 14 8	20 14 8	16 5 11	16 9 7	23 10 13	16 9 7	21 9 13

Venango,	Tot.,...	430	39	38	36	38	39	25	33	35	27	39	40	40
	M.,...	220	18	20	16	20	29	9	22	15	18	20	14	23
	F.,...	210	21	18	20	18	19	14	11	20	9	19	26	17
Warren,	Tot.,...	450	42	53	40	44	28	30	45	34	38	43	28	26
	M.,...	238	25	27	22	28	16	16	26	11	19	22	11	12
	F.,...	232	17	26	18	26	12	14	29	23	19	21	14	13
Washington,	Tot.,...	1,817	156	161	150	151	140	125	145	168	179	147	119	176
	M.,...	930	81	74	71	82	71	61	66	82	97	92	61	81
	F.,...	887	75	87	79	69	69	64	79	86	82	55	58	84
Wayne,	Tot.,...	434	32	44	37	45	36	34	33	40	46	35	24	29
	M.,...	295	17	20	17	19	17	15	16	19	19	12	14	20
	F.,...	229	15	24	20	26	19	19	17	21	26	23	10	9
Westmoreland,	Tot.,...	3,716	359	322	319	284	293	283	312	305	334	300	290	315
	M.,...	1,969	178	163	157	150	158	151	166	176	171	168	161	170
	F.,...	1,747	181	159	162	134	135	132	146	129	163	132	129	145
Wyoming,	Tot.,...	302	16	19	12	22	20	22	9	18	29	10	10	15
	M.,...	105	8	11	8	8	8	15	5	11	13	6	6	10
	F.,...	37	8	8	4	14	12	7	4	7	16	4	4	5
York,	Tot.,...	1,533	135	137	145	126	124	122	108	141	115	146	100	131
	M.,...	792	60	84	81	59	67	59	88	88	61	72	50	55
	F.,...	741	75	53	64	67	57	63	52	53	54	74	50	76

TABLE 2—Continued.

Area.	Nativity.	Ages of Mothers.										Age un- stated.
		Total at all Ages.	Under 15.	15-19.	20-24.	25-29.	30-34.	35-39.	40-44.	45-49.	50 and over.	
Gilberton,	Total.....	191	.....	16	49	48	39	25	9	5	.....	.....
	Native.....	65	.....	9	10	15	12	12	5	.....	.....	.....
	Foreign.....	126	.....	7	39	33	27	13	4	3	.....	.....
Glassport,	Total.....	184	1	19	45	55	89	18	5	1	.....	1
	Native.....	79	.....	11	23	23	37	13	4	.....	.....	.....
	Foreign.....	105	1	8	22	32	24	14	1	1	.....	1
Hanover,	Total.....	168	.....	17	42	50	34	22	3	.....	.....	.....
	Native.....	166	.....	17	41	50	34	21	3	.....	.....	.....
	Foreign.....	2	.....	.....	1	.....	.....	1	.....	.....	.....	.....
Harrisburg,	Total.....	1,326	.....	119	386	391	241	136	43	4	.....	6
	Native.....	1,178	.....	111	342	340	215	121	41	3	.....	5
	Foreign.....	148	.....	8	44	51	26	15	2	1	.....	1
Hazleton,	Total.....	787	.....	68	224	168	163	124	29	2	.....	9
	Native.....	431	.....	49	137	88	81	59	11	.....	.....	6
	Foreign.....	355	.....	19	87	80	81	65	18	2	.....	3
Homestead,	Total.....	701	.....	53	210	199	132	82	22	2	.....	1
	Native.....	255	.....	28	77	61	44	36	10	1	.....	.....
	Foreign.....	446	.....	27	133	138	88	46	12	1	.....	1
Huntington,	Total.....	115	.....	5	29	34	29	13	5	.....	.....	.....
	Native.....	110	.....	5	28	32	28	12	5	.....	.....	.....
	Foreign.....	4	.....	.....	.....	2	1	1	.....	.....	.....	.....
Indiana,	Total.....	109	.....	10	24	26	29	13	7	.....	.....	.....
	Native.....	96	.....	9	19	21	28	13	6	.....	.....	.....
	Foreign.....	13	.....	1	5	5	1	.....	1	.....	.....	.....

TABLE 2 - Continued.

Area.	Nativity.	Ages of Mothers.										Age un- stated.
		Total at all Ages.	Under 15.	15-19.	20-24.	25-29.	30-34.	35-39.	40-44.	45-49.	50 and over.	
Lafayette.	Total.....	425	.....	46	128	110	81	47	12	1	.....	.....
	Native.....	404	.....	46	121	102	79	45	10	1	.....	.....
	Foreign.....	21	.....	.....	7	8	2	2	.....	.....	.....	.....
	Unstated.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Lehigh.	Total.....	115	.....	13	38	28	15	16	5	.....	.....	.....
	Native.....	112	.....	13	37	28	15	16	5	.....	.....	.....
	Foreign.....	3	.....	.....	1	2	.....	.....	.....	.....	.....	.....
	Unstated.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Lewistown.	Total.....	231	.....	24	76	52	48	21	9	2	.....	2
	Native.....	224	.....	24	73	51	43	21	9	2	.....	1
	Foreign.....	10	.....	.....	3	1	5	.....	.....	.....	.....	1
	Unstated.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Lock Haven.	Total.....	171	.....	12	50	39	33	23	9	2	.....	3
	Native.....	160	.....	11	45	32	23	18	6	2	.....	3
	Foreign.....	31	.....	1	5	7	10	5	3	.....	.....	.....
	Unstated.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Luzerne.	Total.....	199	.....	15	41	38	31	17	7	.....	.....	.....
	Native.....	80	.....	12	25	19	11	9	4	.....	.....	.....
	Foreign.....	69	.....	3	16	19	20	8	3	.....	.....	.....
	Unstated.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
McKeesport.	Total.....	1,392	.....	76	412	421	240	170	60	7	.....	6
	Native.....	643	.....	45	178	161	118	79	25	5	.....	2
	Foreign.....	779	.....	31	234	260	122	91	35	2	.....	4
	Unstated.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
McKees Rocks.	Total.....	653	.....	38	195	196	116	64	14	2	.....	28
	Native.....	182	.....	24	47	46	36	12	5	.....	.....	12
	Foreign.....	469	.....	14	148	150	79	51	9	2	.....	16
	Unstated.....	2	.....	.....	.....	.....	1	1	.....	.....	.....	.....
Mahanoy City.	Total.....	504	.....	26	113	121	71	57	19	2	.....	95
	Native.....	234	.....	16	65	61	36	31	12	1	.....	18
	Foreign.....	266	.....	9	41	60	34	26	12	1	.....	77
	Unstated.....	6	.....	1	.....	1	1	1	1	.....	.....	.....

Meadville,	Total,.....	260	17	64	62	47	20	9	1	.....	31
	Native,.....	216	15	54	56	41	24	7	1	.....	18
	Foreign,.....	43	2	10	6	6	5	2	.....	12	
	Unstated,.....	1	.....	.....	.....	.....	.....	.....	.....	.....	1
Middletown,	Total,.....	139	20	42	34	18	16	8	1	.....	.....
	Native,.....	126	20	38	31	15	14	7	1	.....	.....
	Foreign,.....	13	.....	4	3	3	2	1	.....	.....	.....
	Unstated,.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Monessen,	Total,.....	622	45	211	164	121	56	17	3	.....	15
	Native,.....	175	16	64	37	31	20	4	2	.....	1
	Foreign,.....	457	29	147	127	90	36	13	1	.....	14
	Unstated,.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Millvale,	Total,.....	922	11	45	67	52	28	17	2	.....	.....
	Native,.....	155	10	40	55	31	14	5	.....	.....	.....
	Foreign,.....	67	1	5	12	21	14	12	2	.....	.....
	Unstated,.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Milton,	Total,.....	165	17	54	26	34	20	13	1	.....	.....
	Native,.....	163	17	53	26	34	20	12	1	.....	.....
	Foreign,.....	2	.....	1	.....	.....	.....	.....	.....	.....	.....
	Unstated,.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Minersville,	Total,.....	276	8	95	83	54	29	7	.....	.....	.....
	Native,.....	90	4	32	25	15	11	3	.....	.....	.....
	Foreign,.....	186	4	63	58	39	18	4	.....	.....	.....
	Unstated,.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Monongahela,	Total,.....	200	17	73	77	57	31	5	.....	.....	.....
	Native,.....	135	11	46	49	36	10	3	.....	.....	.....
	Foreign,.....	165	6	27	28	21	21	2	.....	.....	.....
	Unstated,.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Mount Carmel,	Total,.....	630	46	162	172	122	97	26	5	.....	.....
	Native,.....	325	33	102	88	52	45	4	.....	.....	.....
	Foreign,.....	301	13	60	84	70	52	22	3	.....	.....
	Unstated,.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Mount Pleasant,	Total,.....	162	16	36	44	41	17	8	.....	.....	.....
	Native,.....	95	15	22	25	20	9	4	.....	.....	.....
	Foreign,.....	66	1	14	19	20	8	4	.....	.....	.....
	Unstated,.....	1	.....	.....	.....	1	.....	.....	.....	.....	.....
Murhall,	Total,.....	212	16	63	58	39	35	8	1	.....	1
	Native,.....	55	3	15	11	11	14	4	.....	.....	.....
	Foreign,.....	157	13	48	47	19	21	1	.....	.....	.....
	Unstated,.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Nanticoke,	Total,.....	617	39	234	162	93	70	21	5	.....	3
	Native,.....	242	28	117	51	21	18	5	1	.....	1
	Foreign,.....	373	11	117	101	71	52	16	4	.....	1
	Unstated,.....	2	.....	.....	.....	1	.....	.....	.....	.....	1

TABLE 2—Continued.

Area.	Nativity.	Ages of Mothers.										Age un- stated.
		Total at all Ages.	Under 15.	15-19.	20-24.	25-29.	30-34.	35-39.	40-44.	45-49.	50 and over.	
New Brighton,	Total,.....	221	.....	18	78	57	49	21	7	.....	.....	6
	Native,.....	136	.....	15	63	46	41	19	5	.....	.....	5
	Foreign, Unstated,.....	36	.....	2	10	11	8	2	2	.....	.....	1
New Castle,	Total,.....	1,175	.....	93	323	310	195	130	36	4	.....	14
	Native,.....	691	.....	57	227	189	105	94	15	1	.....	3
	Foreign, Unstated,.....	484	.....	36	126	151	90	46	21	3	.....	11
New Kensington,	Total,.....	315	.....	30	108	94	50	24	9	.....	.....	.....
	Native,.....	140	.....	20	50	36	15	14	5	.....	.....	.....
	Foreign, Unstated,.....	175	.....	10	58	58	35	10	4	.....	.....	.....
Norristown,	Total,.....	578	1	54	176	155	107	68	18	1	.....	8
	Native,.....	394	1	36	123	110	70	40	14	.....	.....	8
	Foreign, Unstated,.....	181	.....	18	53	45	37	26	4	1	.....	.....
North Braddock,	Total,.....	490	.....	18	126	138	71	66	11	.....	.....	.....
	Native,.....	198	.....	10	70	65	34	17	2	.....	.....	.....
	Foreign, Unstated,.....	292	.....	8	56	73	37	49	9	.....	.....	.....
Northampton,	Total,.....	433	.....	46	150	125	69	33	9	.....	.....	1
	Native,.....	137	.....	26	33	26	29	18	4	.....	.....	1
	Foreign, Unstated,.....	296	.....	20	117	99	40	15	5	.....	.....	.....
Oil City,	Total,.....	362	.....	23	93	86	85	45	23	1	.....	6
	Native,.....	304	.....	18	81	73	73	36	18	1	.....	4
	Foreign, Unstated,.....	55	.....	5	12	13	12	9	5	.....	.....	2
Old Forge,	Total,.....	613	.....	46	183	154	117	86	25	2	.....	.....
	Native,.....	296	.....	16	82	72	12	12	2	.....	.....	.....
	Foreign, Unstated,.....	517	.....	30	151	132	105	74	23	2	.....	.....

Olyphant,	276	.....	23	94	79	46	27	6	1	.....
Native,	91	.....	10	32	25	13	8	2	1	.....
Foreign,	185	.....	13	62	54	33	19	4	.....	.....
Unstated, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Philadelphia,	39,811	19	2,639	11,506	11,065	7,896	4,827	1,500	110	4
Native,	21,690	19	1,962	6,635	5,785	3,972	2,357	735	66	2
Foreign,	18,090	.....	676	4,800	5,285	3,916	2,470	764	74	2
Unstated,	31	.....	1	8	5	8	.....	1	.....	8
Phoenixville,	291	1	29	85	59	45	46	13	2	.....
Native,	128	1	12	36	30	23	22	4	1	.....
Foreign,	163	.....	8	49	40	22	24	9	.....	.....
Unstated, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Pittsburgh,	15,373	6	981	4,209	4,279	2,944	1,753	607	51	1
Native,	8,052	6	714	2,338	2,138	1,412	816	256	19	333
Foreign,	7,277	.....	263	1,861	2,129	1,535	894	350	32	1
Unstated,	41	.....	4	10	12	7	3	1	.....	7
Pittston,	570	.....	37	146	174	112	76	21	1	3
Native,	220	.....	8	58	67	45	40	10	1	1
Foreign,	339	.....	29	87	107	67	36	11	.....	2
Unstated,	1	.....	.....	1	.....	.....	.....	.....	.....	.....
Plymouth,	592	.....	29	171	165	115	82	26	.....	4
Native,	256	.....	19	90	96	41	22	7	.....	1
Foreign,	336	.....	10	81	99	74	50	19	.....	3
Unstated, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Pottsville,	516	.....	31	135	142	112	68	24	3	1
Native,	429	.....	28	116	112	89	52	20	2	1
Foreign,	96	.....	3	19	30	23	16	4	1	.....
Unstated, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Pottstown,	355	.....	49	97	83	41	54	20	4	1
Native,	301	.....	46	86	67	38	42	18	3	3
Foreign,	51	.....	3	11	16	6	12	2	1	.....
Unstated, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Punxsutawney,	224	.....	15	69	57	36	31	12	1	.....
Native,	172	.....	13	59	39	29	21	8	.....	.....
Foreign,	52	.....	2	10	18	7	10	4	1	.....
Unstated, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Rankin,	305	2	18	112	80	49	36	8	.....	.....
Native,	166	.....	8	23	13	9	8	2	.....	.....
Foreign,	249	2	10	89	67	47	28	6	.....	.....
Unstated, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Reading,	2,346	.....	256	712	652	390	254	88	4	.....
Native,	1,893	.....	237	564	477	295	477	68	3	.....
Foreign,	523	.....	19	148	175	95	65	20	1	.....
Unstated, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....

TABLE 2—Continued.

Area.	Nativity.	Ages of Mothers.										Age un- stated.
		Total at all Ages.	Under 15.	15-19.	20-24.	25-29.	30-34.	35-39.	40-44.	45-49.	50 and over.	
Columbia.	Total.....	528	1	68	141	109	90	77	82	5	1	3
	Native.....	488	1	66	131	99	82	71	28	2	1	3
	Foreign.....	42		2	10	9	7	6	4	4		
	Unstated.....	1				1						
Crawford.	Total.....	522		58	135	125	97	70	27	4		6
	Native.....	509		58	134	120	93	69	26	4		5
	Foreign.....	12			1	5	3	1	1			1
	Unstated.....	1					1					
Cumberland.	Total.....	576	1	54	170	140	108	69	25	3		6
	Native.....	565	1	54	168	137	105	67	25	3		5
	Foreign.....	10			2	3	3	2				
	Unstated.....	1										1
Dauphin.	Total.....	874		88	260	196	175	106	37	8		4
	Native.....	725		78	212	158	148	88	32	6		3
	Foreign.....	148		10	48	38	27	18	5	1		1
	Unstated.....	1										
Delaware.	Total.....	678		50	149	171	156	99	41	5		7
	Native.....	489		46	120	115	108	65	28	2		5
	Foreign.....	188		4	29	55	48	34	13	3		2
	Unstated.....	1				1						
Elk.	Total.....	631		55	165	145	122	54	41	23	1	25
	Native.....	379		41	112	81	61	21	19	21		23
	Foreign.....	250		14	53	64	61	32	22	2	1	1
	Unstated.....	2						1				1
Erie.	Total.....	553		45	121	143	125	82	33	2		2
	Native.....	494		42	110	130	114	67	28	1		2
	Foreign.....	59		3	11	13	11	15	5	1		
	Unstated.....											
Fayette.	Total.....	3,455		327	955	914	614	391	157	17		40
	Native.....	1,665		228	461	397	282	186	78	11		19
	Foreign.....	1,783		108	490	515	331	206	79	6		19
	Unstated.....	7		1	1	2	1					2

TABLE 2—Continued.

Area.	Nativity.	Ages of Mothers.										Age un- stated.
		Total at all Ages.	Under 15.	15-19.	20-24.	25-29.	30-34.	35-39.	40-44.	45-49.	50 and over.	
Susquehanna.	Total.....	376	.....	31	96	103	68	49	24	2	1	2
	Native.....	365	.....	31	95	99	67	47	21	2	1	2
	Foreign.....	10	.....	.....	1	3	1	.....	3	.....	.....	.....
Tioga.	Total.....	619	.....	55	168	170	104	79	33	8	.....	1
	Native.....	559	1	55	158	160	89	57	27	3	.....	.....
	Foreign.....	69	.....	.....	10	10	15	22	6	5	.....	1
Union.	Total.....	232	.....	26	72	48	53	20	12	1	.....	.....
	Native.....	228	.....	25	71	48	51	20	12	1	.....	.....
	Foreign.....	4	.....	1	1	.....	2	.....	.....	.....	.....	.....
Venango.	Total.....	430	2	47	165	108	82	62	31	1	.....	2
	Native.....	425	2	47	163	106	81	62	21	1	.....	2
	Foreign.....	5	.....	.....	2	2	1	.....	.....	.....	.....	.....
Warren.	Total.....	450	.....	39	123	122	72	48	16	1	.....	1
	Native.....	343	.....	34	99	97	55	40	16	1	.....	1
	Foreign.....	106	.....	5	24	25	16	8	.....	.....	.....	.....
Washington.	Total.....	1,817	2	150	530	439	355	216	67	9	.....	9
	Native.....	1,990	2	112	285	240	184	118	39	6	.....	4
	Foreign.....	825	.....	38	245	239	170	98	28	3	.....	4
Wayne.	Total.....	434	1	31	121	119	74	63	22	.....	.....	3
	Native.....	375	1	29	109	107	58	51	18	.....	.....	2
	Foreign.....	58	.....	2	12	12	16	.....	4	.....	.....	1
Westmoreland.	Total.....	3,716	3	319	976	988	747	441	170	25	1	36
	Native.....	1,757	3	238	862	846	527	227	198	11	1	9
	Foreign.....	1,951	.....	98	487	570	419	244	93	14	.....	24
	Total.....	8	.....	2	.....	.....	1	2	.....	.....	.....	3

Archbald,	224	51	33	33	22	25	9	8	9	6	1	1	2
Native,	107	17	18	16	16	15	2	7	4	4	1	1	2
Foreign,	117	34	15	17	6	10	7	6	5	2	1	1	2
Unstated,													
Ashland,	185	45	44	27	30	6	6	6	7	5	4		
Native,	176	45	42	26	29	6	5	3	7	5	3		
Foreign,	9		2	1	1		1	3			1		
Unstated,													
Ashley,	103	41	39	25	31	19	11	5	5	3	2	2	2
Native,	75	19	13	8	19	8	1	1	1	1	1	1	1
Foreign,	117	22	25	17	15	13	7	4	4	2	1	1	1
Unstated,	1		1										
Bangor,	120	32	23	15	20	4	7	5	4	2	3		
Native,	101	31	20	13	15	3	6	5	2	2	3		
Foreign,	16	1	3	2	5	1	1						
Unstated,													
Beaver Falls,	319	94	69	66	44	25	21	10	11	4	1	2	
Native,	207	65	41	35	25	15	8	5	7	2		2	
Foreign,	142	29	28	31	19	10	13	5	4	2	1		
Unstated,													
Bellevue,	161	70	37	25	10	4	4	2	2	2		3	
Native,	114	68	33	21	9	4	3	1	2	1		1	
Foreign,	15	2	4	4	1		1	1		1		2	
Unstated,	2												
Berwick,	166	53	39	25	18	8	11	3	3	1	2	2	
Native,	153	50	37	24	16	7	9	2	3	1	2	2	
Foreign,	13	3	2	1	2	1	2	1		1			
Unstated,													
Bethlehem,	319	124	73	41	37	11	9	5	2	7	1	2	3
Native,	285	112	67	35	32	10	8	4	2	6	1	1	3
Foreign,	33	12	5	6	5	1	1	1		1		1	
Unstated,	1		1										
Blakely,	111	36	24	16	10	9	9	5	3	3	2		1
Native,	53	22	20	12	7	8	7	4	3	1	1		1
Foreign,	27	4	4	4	3	1	2	4		2			
Unstated,	1			1									
Bloomsburg,	123	32	28	23	14	11	8	1		3	2	2	
Native,	128	30	37	22	11	12	7	1		3	2	2	
Foreign,	10	2	1	1	3	2	1						
Unstated,													
Braddock,	847	185	171	149	107	85	52	40	26	11	9	7	3
Native,	233	78	53	35	26	13	9	9	6	1	1	1	1
Foreign,	613	106	118	114	81	72	43	31	20	10	7	7	2
Unstated,	1	1											

Chambersburg,	Total,.....	315	97	67	52	25	26	16	9	8	3	4	.....	2	2
	Native,.....	236	49	66	49	24	26	13	9	8	3	4	.....	.....	.....
	Foreign,.....	9	1	1	3	1	.....	3	.....	.....	.....	.....	.....	.....	.....
	Unstated,.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Charleroi,	Total,.....	318	89	64	45	39	30	12	16	9	4	3	.....	1	1
	Native,.....	135	43	31	13	16	40	2	2	2	2	1	.....	.....	.....
	Foreign,.....	183	46	33	32	23	20	3	13	6	2	1	.....	.....	.....
	Unstated,.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Chester,	Total,.....	1,022	296	199	147	110	62	56	41	21	22	11	.....	6	6
	Native,.....	880	229	129	84	68	38	33	23	16	16	9	.....	2	2
	Foreign,.....	310	73	70	63	41	24	23	18	8	6	5	.....	1	1
	Unstated,.....	2	1	.....	.....	1	.....	.....	.....	.....	.....	.....	.....	.....	.....
Clearfield,	Total,.....	179	39	30	22	21	8	10	8	6	3	4	.....	.....	.....
	Native,.....	103	35	29	19	29	6	10	7	6	3	2	.....	.....	.....
	Foreign,.....	15	4	1	2	1	2	.....	1	.....	.....	.....	.....	.....	.....
	Unstated,.....	1	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Coudale,	Total,.....	208	42	49	26	27	20	12	8	6	2	1	.....	1	1
	Native,.....	73	13	19	8	8	12	6	3	3	1	1	.....	.....	.....
	Foreign,.....	135	29	30	18	19	18	6	5	3	1	.....	.....	.....	.....
	Unstated,.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Coatesville,	Total,.....	275	73	71	43	26	20	15	9	6	3	5	.....	1	1
	Native,.....	208	58	59	31	12	18	11	7	4	3	5	.....	.....	.....
	Foreign,.....	67	15	15	12	14	2	4	2	2	.....	.....	.....	.....	.....
	Unstated,.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Columbia,	Total,.....	213	67	56	39	20	20	14	6	5	3	1	.....	2	2
	Native,.....	234	66	52	37	19	19	14	6	5	3	1	.....	.....	.....
	Foreign,.....	9	1	4	2	1	1	.....	.....	.....	.....	.....	.....	.....	.....
	Unstated,.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Connellsville,	Total,.....	373	91	73	46	32	32	23	17	14	3	3	.....	1	1
	Native,.....	296	86	63	37	20	25	9	8	6	2	1	.....	.....	.....
	Foreign,.....	87	8	10	9	12	7	14	9	8	3	2	.....	.....	.....
	Unstated,.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Conshohocken,	Total,.....	295	50	43	34	24	18	9	12	3	4	1	.....	3	3
	Native,.....	111	26	26	17	12	8	5	2	1	2	1	.....	.....	.....
	Foreign,.....	91	11	17	17	12	10	4	10	2	2	1	.....	.....	.....
	Unstated,.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Coraopolis,	Total,.....	175	43	35	30	29	17	8	4	6	2	1	.....	.....	.....
	Native,.....	108	29	28	13	17	8	5	2	5	2	1	.....	.....	.....
	Foreign,.....	67	14	7	17	12	9	3	2	1	2	.....	.....	.....	.....
	Unstated,.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Corry,	Total,.....	105	35	26	20	10	.....	6	3	2	2	.....	.....	.....	.....
	Native,.....	88	32	22	17	6	.....	5	2	1	.....	.....	.....	.....	.....
	Foreign,.....	17	3	4	3	4	.....	1	1	1	.....	.....	.....	.....	.....
	Unstated,.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....

TABLE 3—Continued.

Area.	Nativity of mother.	Number of Child.												
		Total.	1st.	2nd.	3rd.	4th.	5th.	6th.	7th.	8th.	9th.	10th.	11th.	12th.
Danville,	Total.....	173	38	35	21	25	11	8	10	11	8	1	3	2
	Native.....	167	38	35	19	23	11	8	9	11	11	1	3	2
	Foreign.....	6	.....	.....	2	2	.....	.....	1	.....	.....	.....	.....	.....
	Unstated.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Darby,	Total.....	156	41	23	27	27	8	9	8	3	.....	2	.....	1
	Native.....	137	35	21	26	23	6	6	8	3	.....	1	.....	1
	Foreign.....	19	6	2	1	4	2	3	.....	.....	.....	.....	.....	.....
	Unstated.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Dickson City,	Total.....	413	82	97	69	45	43	29	27	12	18	3	11	.....
	Native.....	396	28	23	17	6	7	4	4	3	2	.....	2	1
	Foreign.....	317	54	74	52	39	36	25	23	9	16	3	10	.....
	Unstated.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Donora,	Total.....	422	79	82	65	59	43	29	22	16	6	3	3	4
	Native.....	111	30	17	20	17	8	7	2	3	2	1	.....	.....
	Foreign.....	321	49	65	45	42	35	22	20	13	4	2	3	4
	Unstated.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
DuBois,	Total.....	356	79	70	51	51	26	35	12	7	7	8	4	.....
	Native.....	258	66	57	36	31	21	24	9	4	4	2	2	1
	Foreign.....	98	13	13	15	20	5	11	3	3	3	6	3	.....
	Unstated.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Dunmore,	Total.....	569	144	92	85	56	58	37	32	22	20	7	6	3
	Native.....	220	76	41	27	18	17	13	8	4	4	6	4	1
	Foreign.....	317	67	50	58	38	41	24	24	18	14	3	4	2
	Unstated.....	2	1	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Duquesne,	Total.....	606	128	114	89	83	45	32	36	20	12	7	5	1
	Native.....	199	61	48	30	25	7	5	11	11	4	4	2	2
	Foreign.....	407	67	96	59	58	38	27	25	16	8	5	3	1
	Unstated.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Duryea,	Total.....	321	59	60	46	54	31	18	10	19	3	7	2	1
	Native.....	19	11	7	9	4	4	4	1	1	2	.....	.....	.....
	Foreign.....	256	40	49	39	45	27	14	9	17	3	5	.....	.....
	Unstated.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....

Jeanette,	Total,	56	67	41	23	20	13	13	9	5	3	1
	Native,	139	37	42	21	14	9	9	5	2	2	1
	Foreign, Unstated,	196	19	25	20	9	11	4	4	3	1	1
Jersey Shore,	Total,	111	29	27	19	7	5	3	2	1	3	1
	Native,	104	28	17	12	6	4	3	2	1	3	1
	Foreign, Unstated,	7	1	2	1	1	1	1	1	1	1	1
Johnstown,	Total,	1,728	327	258	196	150	97	74	41	28	18	9
	Native,	353	191	130	101	60	44	38	21	34	8	4
	Foreign, Unstated,	608	117	113	88	76	40	35	18	11	7	4
Juniata,	Total,	191	38	38	24	16	12	7	9	5	2	1
	Native,	178	36	34	27	15	11	7	8	4	2	1
	Foreign, Unstated,	12	2	4	1	1	1	1	1	1	1	1
Kane,	Total,	477	45	39	32	10	6	6	4	4	3	1
	Native,	111	40	25	26	8	6	6	2	1	3	1
	Foreign, Unstated,	63	5	14	6	4	6	5	2	2	1	1
Kingston,	Total,	172	41	29	23	9	6	4	6	4	3	1
	Native,	87	31	19	12	8	4	2	2	1	3	1
	Foreign, Unstated,	85	13	10	11	1	5	2	4	3	2	1
Knoxville,	Total,	114	28	31	18	8	6	1	1	1	2	1
	Native,	107	27	17	11	5	3	1	1	1	2	1
	Foreign, Unstated,	11	1	5	1	3	3	1	1	1	1	1
Lancaster,	Total,	1,005	263	229	146	62	62	30	19	22	11	5
	Native,	891	277	214	128	51	52	25	14	17	9	4
	Foreign, Unstated,	111	16	15	18	11	10	5	5	5	2	1
Lansford,	Total,	522	87	60	48	30	17	13	6	6	4	3
	Native,	111	38	22	20	12	5	4	1	1	3	1
	Foreign, Unstated,	511	49	38	28	25	12	9	5	5	1	2
Larksville,	Total,	289	66	43	40	24	26	12	9	4	11	5
	Native,	108	41	16	21	14	8	2	2	4	1	1
	Foreign, Unstated,	171	25	27	28	10	18	10	7	4	10	4
Latrobe,	Total,	254	58	51	33	23	15	16	6	7	3	4
	Native,	172	47	33	21	11	9	13	2	5	3	1
	Foreign, Unstated,	82	11	18	11	12	6	3	4	2	1	1

TABLE 3—Continued.

Area.	Nativity. of mother.	Number of Child.											
		Total.	1st.	2nd.	3rd.	4th.	5th.	6th.	7th.	8th.	9th.	10th.	11th.	12th.
New Brighton,	Total,.....	231	73	49	43	24	11	5	7	7	2	4	.....
	Native,.....	196	61	44	37	20	9	5	5	7	2	2	.....
	Foreign, Unstated,.....	35	12	5	6	4	2	.....	2	.....	.....	.....	.....
Newcastle,	Total,.....	1,175	311	292	208	127	86	48	21	18	10	5	2
	Native,.....	691	200	158	119	70	44	27	13	13	5	4	2
	Foreign, Unstated,.....	484	111	104	89	57	42	21	8	13	5	1	.....
New Kensington,	Total,.....	315	89	67	51	42	23	17	11	8	2	3	1
	Native,.....	140	48	32	18	16	13	4	6	2	1	.....	.....
	Foreign, Unstated,.....	175	41	35	33	26	10	13	5	6	1	3	1
Norristown,	Total,.....	578	180	104	98	55	42	24	22	9	11	8	6
	Native,.....	394	141	73	64	28	21	14	14	5	9	4	3
	Foreign, Unstated,.....	181	39	31	34	27	21	10	8	4	2	4	3
North Braddock,	Total,.....	439	111	75	81	43	39	21	30	12	7	5	2
	Native,.....	198	66	39	36	20	20	7	5	2	.....	1	1
	Foreign, Unstated,.....	232	45	36	45	23	19	14	25	10	7	4	1
Northampton,	Total,.....	433	111	87	72	58	36	31	15	10	6	3	2
	Native,.....	137	36	32	16	15	14	10	2	5	3	2	1
	Foreign, Unstated,.....	296	75	55	56	43	22	21	13	5	3	1	.....
Oil City,	Total,.....	362	106	79	48	46	23	18	8	11	2	5	3
	Native,.....	324	94	66	40	35	18	16	8	10	1	5	2
	Foreign, Unstated,.....	55	10	12	8	11	5	2	.....	1	1	.....	.....
Oil Forge,	Total,.....	613	96	108	106	89	61	65	38	23	11	7	4
	Native,.....	493	91	99	96	76	43	44	4	4	1	1	1
	Foreign, Unstated,.....	517	76	86	90	76	55	56	34	19	10	6	4

TABLE 3—Continued.

Area.	Nativity of mother.	Number of Child.												
		Total.	1st.	2nd.	3rd.	4th.	5th.	6th.	7th.	8th.	9th.	10th.	11th.	12th.
Counties—Rural.														
Adams,	Total,	525	109	95	89	49	42	45	28	19	16	9	8	5
	Native,	522	109	95	88	49	42	45	28	18	16	9	8	5
	Foreign,	2			1					1				
	Unstated,	1												
Allegheny,	Total,	4,560	944	882	775	550	416	295	238	137	109	61	39	26
	Native,	2,280	573	429	387	262	179	117	93	71	46	33	18	15
	Foreign,	2,261	367	398	384	287	237	178	144	66	62	28	21	11
	Unstated,	19	4	5	4	1			1		1			
Armstrong,	Total,	1,197	248	227	176	136	132	89	65	37	27	14	14	8
	Native,	928	213	172	132	95	100	66	51	29	24	12	11	6
	Foreign,	268	35	55	44	41	31	23	14	8	3	2	3	2
	Unstated,	1					1							
Beaver,	Total,	499	100	103	65	54	54	35	33	9	14	13	5	2
	Native,	409	89	85	54	45	46	29	25	6	7	10	3	2
	Foreign,	87	11	18	11	9	7	6	8	2	7	3	2	2
	Unstated,	3					1		1	1				
Bedford,	Total,	654	147	112	95	68	56	45	41	34	16	11	11	5
	Native,	615	141	108	87	64	53	45	39	28	14	11	10	4
	Foreign,	34	6	3	6	3	3		2	5	2		1	1
	Unstated,	5		1	2	1				1				
Blair,	Total,	797	162	147	108	102	70	62	39	34	15	7	8	1
	Native,	693	141	134	98	87	69	54	34	30	11	4	7	1
	Foreign,	103	21	13	15	15	10	8	5	4	4	3	1	1
	Unstated,	1												
Bradford,	Total,	633	161	126	98	60	47	41	27	20	20	8	3	7
	Native,	611	156	122	94	57	47	41	27	19	19	7	3	7
	Foreign,	17	5	4	3	3				1	1	1		
	Unstated,	2			1					1				

Berks,	1,559	382	279	242	158	120	120	77	63	50	24	21	13
Native,	1,522	376	269	232	146	115	115	71	60	48	24	21	13
Foreign,	67	12	10	10	12	5	5	6	3	2	.....	.....	.....
Unstated, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Bucks,	879	199	172	141	96	80	43	44	28	23	12	11	7
Native,	759	182	153	122	79	65	35	38	21	19	11	9	5
Foreign,	118	17	19	19	17	15	8	6	7	4	1	1	2
Unstated,	2	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Butler,	1,022	225	194	159	127	94	67	45	36	21	12	6	6
Native,	776	175	153	116	97	63	47	35	33	18	11	6	5
Foreign,	243	50	41	43	29	30	19	10	3	3	1	1	1
Unstated,	3	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Cambria,	1,980	319	341	251	259	189	152	130	78	60	38	28	17
Native,	1,868	244	263	189	138	106	78	69	45	41	23	13	10
Foreign,	862	123	140	135	116	83	74	59	33	26	15	13	7
Unstated,	16	2	2	2	6	.....	.....	2	.....	.....	.....	.....	.....
Cameron,	68	13	7	10	5	16	3	7	1	2	2	1	.....
Native,	61	12	5	9	5	15	3	6	.....	.....	.....	.....	.....
Foreign,	7	1	2	1	.....	.....	.....	1	.....	.....	.....	.....	.....
Unstated, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Carbon,	723	154	135	98	88	63	51	37	36	14	13	12	3
Native,	470	118	96	62	53	40	23	16	22	8	8	11	3
Foreign,	253	36	39	36	35	23	28	21	14	6	5	1	.....
Unstated, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Centre,	804	178	139	116	113	69	69	43	21	35	11	7	5
Native,	677	161	125	99	87	48	43	32	18	29	9	6	.....
Foreign,	127	17	14	17	26	11	16	11	3	6	2	1	.....
Unstated, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Chester,	1,176	290	231	171	129	91	76	54	41	28	19	9	8
Native,	1,024	236	201	150	112	80	65	43	35	25	15	8	8
Foreign,	150	23	27	20	17	14	11	11	6	3	4	1	.....
Unstated,	2	1	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Charlon,	628	129	102	100	87	50	45	35	23	18	16	5	6
Native,	591	121	96	92	83	47	44	34	22	14	13	5	6
Foreign,	37	8	6	8	4	3	1	1	1	4	1	.....	.....
Unstated, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Clearfield,	1,965	367	265	254	213	179	153	95	72	58	59	26	12
Native,	1,161	269	211	168	126	96	86	56	41	32	37	18	11
Foreign,	801	98	81	86	87	84	88	38	31	26	32	8	9
Unstated, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Clinton,	349	77	57	43	42	36	28	17	9	5	7	2	.....
Native,	287	68	53	34	34	23	23	16	5	4	6	3	.....
Foreign,	62	9	4	9	8	13	5	1	4	1	1	.....	.....
Unstated, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....

TABLE 3—Continued.

Area.	Nativity of mother.	Number of Child.												
		Total.	1st.	2nd.	3rd.	4th.	5th.	6th.	7th.	8th.	9th.	10th.	11th.	12th.
Columbia.	Total.....	528	122	104	77	64	37	29	19	20	19	10	8	7
	Native.....	485	118	97	70	58	32	28	19	17	16	8	6	5
	Foreign.....	42	4	7	7	6	4	1	.....	3	3	2	2	2
	Unstated.....	1	.....	.....	.....	.....	1	.....	.....	.....	.....	.....	.....	.....
Crawford.	Total.....	522	186	111	91	63	32	25	21	19	8	5	4	1
	Native.....	509	184	108	88	63	30	25	21	18	7	5	4	1
	Foreign.....	12	2	3	3	.....	2	1	.....	1	.....	.....	.....	.....
	Unstated.....	1	.....	.....	.....	.....	.....	.....	.....	.....	1	.....	.....	.....
Cumberland.	Total.....	576	145	125	95	70	48	39	23	17	8	6	1	.....
	Native.....	565	144	124	91	66	48	38	23	17	8	6	1	.....
	Foreign.....	10	1	1	4	3	.....	1	.....	.....	.....	.....	.....	.....
	Unstated.....	1	.....	.....	.....	1	.....	.....	.....	.....	.....	.....	.....	.....
Dauphin.	Total.....	874	205	162	115	95	73	46	56	23	20	12	14	3
	Native.....	725	183	137	98	82	58	39	51	21	18	9	13	3
	Foreign.....	148	22	25	17	13	15	6	5	2	2	3	1	.....
	Unstated.....	1	.....	.....	.....	.....	.....	1	.....	.....	.....	.....	.....	.....
Delaware.	Total.....	678	166	144	112	69	46	33	25	23	14	6	11	2
	Native.....	489	133	117	71	49	32	18	14	12	10	3	11	1
	Foreign.....	188	33	27	40	20	14	15	11	11	4	3	.....	.....
	Unstated.....	1	.....	.....	1	.....	.....	.....	.....	.....	.....	.....	.....	.....
Elk.	Total.....	631	100	107	90	85	60	39	34	39	25	12	13	5
	Native.....	379	73	69	49	40	28	20	21	20	19	6	11	4
	Foreign.....	250	27	38	41	44	32	19	13	18	6	6	2	1
	Unstated.....	2	.....	.....	.....	1	.....	.....	.....	.....	.....	.....	.....	.....
Erie.	Total.....	553	122	103	106	67	38	34	17	17	14	4	3	3
	Native.....	491	127	94	94	63	33	28	14	11	11	3	2	2
	Foreign.....	59	5	9	12	4	5	6	3	6	3	1	1	1
	Unstated.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Fayette.	Total.....	3,455	645	531	512	458	338	253	189	134	84	82	31	36
	Native.....	1,665	399	256	279	189	153	115	89	64	34	44	14	20
	Foreign.....	1,783	245	274	233	269	180	137	100	70	50	38	20	16
	Unstated.....	7	1	1	.....	.....	.....	1	.....	.....	.....	.....	.....	.....

Forest,	221	47	41	26	20	23	10	23	12	4	3	3	.....
Native,	294	45	38	25	18	19	10	21	11	3	3	3	.....
Foreign, .....	.....	2	3	1	2	4	.....	.....	1	1	.....	.....	.....
Unstated, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Franklin,	887	214	155	120	98	75	65	49	30	24	17	15	9
Native,	874	200	155	118	95	75	65	49	29	24	16	15	9
Foreign,	12	4	.....	2	3	.....	.....	.....	1	.....	.....	.....	.....
Unstated,	1	1	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Fulton,	242	54	37	31	21	30	20	17	8	8	3	.....	4
Native,	237	54	36	31	21	30	19	17	8	7	2	.....	4
Foreign,	2	.....	.....	.....	.....	.....	1	.....	.....	.....	.....	.....	.....
Unstated,	3	.....	1	.....	.....	.....	.....	.....	.....	1	.....	.....	.....
Greene,	364	100	68	53	35	32	32	10	9	7	5	2	2
Native,	357	99	66	53	34	31	30	10	9	7	5	2	2
Foreign,	6	1	2	.....	1	1	1	.....	.....	.....	.....	.....	.....
Unstated,	1	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Huntingdon,	455	111	63	84	45	41	38	16	15	11	14	6	2
Native,	422	106	59	79	33	38	35	16	15	11	13	5	2
Foreign,	30	4	4	5	1	3	3	.....	.....	.....	.....	.....	.....
Unstated,	3	1	.....	.....	.....	.....	.....	.....	.....	.....	1	.....	.....
Indiana,	1,669	352	307	264	223	159	111	65	74	33	29	16	6
Native,	919	228	159	144	116	78	60	28	49	18	14	7	8
Foreign,	750	124	148	120	107	81	51	37	25	15	15	9	3
Unstated, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Jefferson,	1,247	215	187	173	164	118	114	89	57	47	24	16	16
Native,	733	117	128	111	92	60	63	38	26	26	13	7	5
Foreign,	510	67	58	61	71	58	51	51	31	21	11	9	11
Unstated,	4	1	.....	1	1	.....	.....	.....	.....	.....	.....	.....	.....
Junata,	278	59	61	44	25	26	17	14	11	9	3	4	.....
Native,	277	59	61	44	25	26	17	14	11	9	3	4	.....
Foreign,	1	.....	1	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Unstated, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Lackawanna,	586	116	103	102	77	47	39	19	19	11	19	6	7
Native,	289	65	52	49	32	17	13	3	8	8	6	3	1
Foreign,	317	51	51	53	45	30	26	16	11	3	13	3	6
Unstated, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Lancaster,	2,074	442	381	331	229	104	129	94	67	50	44	31	18
Native,	2,049	436	379	329	226	190	126	93	65	50	43	30	18
Foreign,	13	3	2	1	2	1	3	.....	1	.....	1	1	.....
Unstated,	12	3	2	1	1	3	.....	1	1	.....	.....	.....	.....
Lawrence,	574	117	109	90	76	48	34	30	18	7	4	4	2
Native,	558	79	68	57	44	35	23	16	8	4	1	4	2
Foreign,	216	33	41	33	32	13	11	14	10	3	3	.....	.....
Unstated, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....

TABLE 3—Continued.

Area.	Nativity of mother.	Number of Child.												
		Total.	1st.	2nd.	3rd.	4th.	5th.	6th.	7th.	8th.	9th.	10th.	11th.	12th.
Susquehanna.	Total.....	376	91	85	56	44	30	23	15	5	4	2	3	6
	Native.....	365	90	85	55	43	27	21	14	4	3	2	3	6
	Foreign, Unstated.....	10	1	.....	1	1	2	2	1	1	1	.....	.....	.....
Tioga.	Total.....	619	148	130	91	63	53	45	21	20	14	5	3	6
	Native.....	550	141	122	90	53	45	38	16	18	7	4	1	3
	Foreign, Unstated.....	69	7	8	1	10	8	7	5	2	7	1	2	3
Union.	Total.....	322	62	37	49	20	24	13	9	3	5	2	3	.....
	Native.....	228	61	37	48	20	24	12	9	3	5	1	3	.....
	Foreign, Unstated.....	4	1	.....	1	.....	.....	1	.....	.....	.....	.....	.....	.....
Venango.	Total.....	430	118	87	63	47	32	19	19	13	12	8	2	2
	Native.....	425	117	86	61	47	32	18	19	13	12	8	2	2
	Foreign, Unstated.....	5	1	1	2	.....	.....	1	.....	.....	.....	.....	.....	.....
Warren.	Total.....	450	98	99	88	47	37	22	22	16	10	1	2	1
	Native.....	313	83	76	68	33	30	14	14	8	7	1	2	1
	Foreign, Unstated.....	106	15	22	20	14	7	8	8	8	3	.....	.....	.....
Washington.	Total.....	1,817	357	347	313	258	159	126	81	55	28	15	15	13
	Native.....	990	226	199	171	138	84	63	33	27	14	8	7	8
	Foreign, Unstated.....	825	131	148	142	140	75	62	48	28	14	7	8	5
Wayne.	Total.....	434	120	97	58	45	33	28	20	9	6	6	4	5
	Native.....	375	112	87	61	34	28	25	14	7	3	4	3	4
	Foreign, Unstated.....	58	8	10	7	11	5	3	6	2	2	2	1	1
Westmoreland.	Total.....	3,716	704	618	549	495	366	313	189	137	98	71	45	24
	Native.....	1,757	424	327	243	196	152	138	73	55	43	27	22	12
	Foreign, Unstated.....	1,951	279	290	305	297	214	174	116	82	55	44	23	12

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Philadelphia,	Total,	67	56	18	15	8	5	1	681
	Native,	34	31	14	8	4	1	315
	Foreign,	33	25	4	7	1	258
	Unstated, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	8
Phoenixville,	Total, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	1
	Native, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	1
	Foreign, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
	Unstated, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Pittsburgh,	Total,	18	16	4	6	1	.....	.....	.....	.....	.....	1,457
	Native,	3	5	3	1	1	.....	.....	.....	.....	.....	688
	Foreign,	15	11	1	5	.....	.....	.....	.....	.....	.....	706
	Unstated, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	23
Pittston,	Total,	1	.....	.....	.....	.....	.....	.....	.....	.....	.....	23
	Native, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	9
	Foreign,	1	.....	.....	.....	.....	.....	.....	.....	.....	.....	14
	Unstated, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Plymouth,	Total,	5	1	2	.....	.....	.....	.....	.....	.....	.....	7
	Native, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	4
	Foreign,	5	1	2	.....	.....	.....	.....	.....	.....	.....	3
	Unstated, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Portsville,	Total,	1	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
	Native,	1	.....	1	.....	1	.....	.....	.....	.....	.....	.....
	Foreign, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
	Unstated, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Portstown,	Total,	1	.....	.....	.....	.....	.....	.....	.....	.....	.....	15
	Native,	1	.....	.....	.....	.....	.....	.....	.....	.....	.....	14
	Foreign, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	1
	Unstated, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Punxsutawney,	Total,	2	.....	.....	.....	.....	.....	.....	.....	.....	.....	2
	Native, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	1
	Foreign,	2	.....	.....	.....	.....	.....	.....	.....	.....	.....	1
	Unstated, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Rankin,	Total,	1	.....	.....	.....	.....	.....	.....	.....	.....	.....	2
	Native, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
	Foreign,	1	.....	.....	.....	.....	.....	.....	.....	.....	.....	2
	Unstated, .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Reading,	Total,	7	5	2	.....	.....	1	.....	.....	.....	.....	2
	Native,	7	1	1	2
	Foreign,
	Unstated,
Rochester,	Total,	2
	Native,
	Foreign,
	Unstated,

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BIRTH TABLE 4.

Plural births Illegitimates for the entire State, for all municipalities having more than 5,000 population, for groups of municipalities having less than 5,000 population and for the Rural sections of each county. (Stillbirths excluded.)

Area.	Nativity.	Twins.	Triplets.	Illegitimates.
Entire State,	Total,	2,283	30	4,595
	Native,	1,417	17	4,082
	Foreign,	862	13	543
	Unstated,	4	.....	20
Total of all municipalities over 5,000 population,	Total,	1,258	18	2,504
	Native,	723	7	2,362
	Foreign,	562	11	426
	Unstated,	1	.....	16
Total of all municipalities under 5,000 population,	Total,	256	2	471
	Native,	176	2	451
	Foreign,	80	.....	20
	Unstated, .....	.....	.....	.....
Rural,	Total,	741	10	1,320
	Native,	513	8	1,219
	Foreign,	220	2	97
	Unstated,	3	.....	4
Allentown,	Total,	15	.....	36
	Native,	9	.....	22
	Foreign,	6	.....	14
	Unstated, .....	.....	.....	.....
Altoona,	Total,	16	.....	35
	Native,	13	.....	34
	Foreign,	3	.....	1
	Unstated, .....	.....	.....	.....
Ambridge,	Total,	2	.....	1
	Native,	1	.....	1
	Foreign,	1	.....	.....
	Unstated, .....	.....	.....	.....
Archbald,	Total,	2	.....	2
	Native,	1	.....	1
	Foreign,	1	.....	1
	Unstated, .....	.....	.....	.....
Ashland,	Total,	1	.....	7
	Native,	1	.....	7
	Foreign, .....	.....	.....	.....
	Unstated, .....	.....	.....	.....
Ashley,	Total,	2	.....	1
	Native,	1	.....	1
	Foreign,	1	.....	.....
	Unstated, .....	.....	.....	.....
Bangor,	Total,	2	.....	2
	Native,	2	.....	2
	Foreign, .....	.....	.....	.....
	Unstated, .....	.....	.....	.....
Beaver Falls,	Total,	5	.....	4
	Native,	4	.....	3
	Foreign,	1	.....	1
	Unstated, .....	.....	.....	.....
Bellevue,	Total,	1	.....	32
	Native,	1	.....	29
	Foreign, .....	.....	.....	2
	Unstated, .....	.....	.....	1
Berwick,	Total,	2	.....	4
	Native,	2	.....	4
	Foreign, .....	.....	.....	.....
	Unstated, .....	.....	.....	.....
Bethlehem,	Total,	2	.....	4
	Native,	2	.....	4
	Foreign, .....	.....	.....	.....
	Unstated, .....	.....	.....	.....

TABLE 4--Continued.

Area.	Nativity.	Twins.	Triplets.	Illegit- imates.
Blakely,	Total, .....	.....	.....	.....
	Native, .....	.....	.....	.....
	Foreign, .....	.....	.....	.....
	Unstated, .....	.....	.....	.....
Bloomsburg,	Total, .....	.....	.....	6
	Native, .....	.....	.....	6
	Foreign, .....	.....	.....	.....
	Unstated, .....	.....	.....	.....
Braddock,	Total,	6	1	7
	Native,	1	.....	5
	Foreign,	5	1	2
	Unstated, .....	.....	.....	.....
Bradford,	Total,	5	.....	5
	Native,	4	.....	3
	Foreign,	1	.....	1
	Unstated, .....	.....	.....	1
Bristol,	Total,	1	.....	6
	Native, .....	.....	.....	6
	Foreign,	1	.....	.....
	Unstated, .....	.....	.....	.....
Butler,	Total,	9	.....	6
	Native,	8	.....	5
	Foreign,	1	.....	.....
	Unstated, .....	.....	.....	1
Carbondale,	Total,	4	.....	4
	Native,	2	.....	3
	Foreign,	2	.....	1
	Unstated, .....	.....	.....	.....
Carlisle,	Total,	1	.....	13
	Native,	1	.....	13
	Foreign, .....	.....	.....	.....
	Unstated, .....	.....	.....	.....
Carnegie,	Total,	7	.....	5
	Native,	2	.....	2
	Foreign,	5	.....	3
	Unstated, .....	.....	.....	.....
Carriek,	Total,	3	.....	2
	Native,	3	.....	2
	Foreign, .....	.....	.....	.....
	Unstated, .....	.....	.....	.....
Catasauqua,	Total,	3	.....	.....
	Native,	3	.....	.....
	Foreign, .....	.....	.....	1
	Unstated, .....	.....	.....	.....
Chambersburg,	Total,	1	.....	15
	Native,	1	.....	15
	Foreign, .....	.....	.....	.....
	Unstated, .....	.....	.....	.....
Charleroi,	Total,	1	.....	2
	Native, .....	.....	.....	2
	Foreign,	1	.....	.....
	Unstated, .....	.....	.....	.....
Chester,	Total,	11	1	29
	Native,	5	.....	29
	Foreign,	6	1	.....
	Unstated, .....	.....	.....	.....
Clearfield,	Total,	6	.....	5
	Native,	6	.....	3
	Foreign, .....	.....	.....	2
	Unstated, .....	.....	.....	.....
Coaldale,	Total, .....	.....	.....	2
	Native, .....	.....	.....	1
	Foreign, .....	.....	.....	1
	Unstated, .....	.....	.....	.....
Coatesville,	Total,	6	.....	3
	Native,	4	.....	3
	Foreign,	2	.....	.....
	Unstated, .....	.....	.....	.....

TABLE 4--Continued.

Area.	Nativity.	Twins.	Triplets.	Illegitimates.
Columbia,	Total,	2	.....	16
	Native,	2	.....	15
	Foreign, .....	.....	.....	1
	Unstated, .....	.....	.....	.....
Connellsville,	Total,	4	.....	6
	Native,	3	.....	6
	Foreign,	1	.....	.....
	Unstated, .....	.....	.....	.....
Coushohocken,	Total,	7	.....	.....
	Native,	3	.....	.....
	Foreign,	4	.....	.....
	Unstated, .....	.....	.....	.....
Coroapolis,	Total, .....	.....	.....	3
	Native, .....	.....	.....	2
	Foreign, .....	.....	.....	1
	Unstated, .....	.....	.....	.....
Corry,	Total,	1	.....	2
	Native,	1	.....	2
	Foreign, .....	.....	.....	.....
	Unstated, .....	.....	.....	.....
Danville,	Total,	4	.....	5
	Native,	4	.....	5
	Foreign, .....	.....	.....	.....
	Unstated, .....	.....	.....	.....
Darby,	Total,	3	.....	2
	Native,	2	.....	1
	Foreign,	1	.....	1
	Unstated, .....	.....	.....	.....
Dickson City,	Total,	5	.....	2
	Native, .....	.....	.....	.....
	Foreign,	5	.....	2
	Unstated, .....	.....	.....	.....
Donora,	Total,	4	.....	5
	Native,	3	.....	3
	Foreign,	1	.....	2
	Unstated, .....	.....	.....	.....
DuBois,	Total,	6	.....	3
	Native,	4	.....	3
	Foreign,	2	.....	.....
	Unstated, .....	.....	.....	.....
Dunmore,	Total,	5	.....	27
	Native,	2	.....	21
	Foreign,	2	.....	6
	Unstated,	1	.....	.....
Duquesne,	Total,	9	.....	3
	Native,	3	.....	2
	Foreign,	6	.....	1
	Unstated, .....	.....	.....	.....
Duryea,	Total,	4	.....	2
	Native,	1	.....	.....
	Foreign,	3	.....	2
	Unstated, .....	.....	.....	.....
Easton,	Total,	1	.....	13
	Native,	1	.....	10
	Foreign, .....	.....	.....	3
	Unstated, .....	.....	.....	.....
Edwardsville,	Total,	1	.....	1
	Native, .....	.....	.....	1
	Foreign,	1	.....	.....
	Unstated, .....	.....	.....	.....
East Conemaugh,	Total,	1	.....	1
	Native, .....	.....	.....	1
	Foreign,	1	.....	.....
	Unstated, .....	.....	.....	.....
East Pittsburgh,	Total,	2	.....	1
	Native,	1	.....	1
	Foreign,	1	.....	.....
	Unstated, .....	.....	.....	.....

TABLE 4—Continued.

Area.	Nativity.	Twins.	Triplets.	Illegitimates.
Erie,	Total,	15	.....	19
	Native,	7	.....	16
	Foreign,	8	.....	3
	Unstated, .....	.....	.....	.....
Etna,	Total,	5	.....	1
	Native,	1	.....	1
	Foreign,	4	.....	.....
	Unstated, .....	.....	.....	.....
Forest City,	Total,	5	.....	2
	Native, .....	.....	.....	2
	Foreign,	5	.....	.....
	Unstated, .....	.....	.....	.....
Franklin,	Total,	1	.....	7
	Native, .....	.....	.....	7
	Foreign,	1	.....	.....
	Unstated, .....	.....	.....	.....
Freeland,	Total,	1	.....	2
	Native,	1	.....	2
	Foreign, .....	.....	.....	.....
	Unstated, .....	.....	.....	.....
Greensburg,	Total,	4	.....	16
	Native,	2	.....	15
	Foreign,	2	.....	1
	Unstated, .....	.....	.....	.....
Greenville,	Total,	2	.....	2
	Native, .....	.....	.....	2
	Foreign,	2	.....	.....
	Unstated, .....	.....	.....	.....
Gilberton,	Total,	3	.....	.....
	Native, .....	.....	.....	.....
	Foreign,	3	.....	.....
	Unstated, .....	.....	.....	.....
Glassport,	Total,	2	.....	3
	Native,	2	.....	3
	Foreign, .....	.....	.....	.....
	Unstated, .....	.....	.....	.....
Hanover,	Total, .....	.....	.....	5
	Native, .....	.....	.....	5
	Foreign, .....	.....	.....	.....
	Unstated, .....	.....	.....	.....
Harrisburg,	Total,	19	1	43
	Native,	14	1	43
	Foreign,	5	.....	.....
	Unstated, .....	.....	.....	.....
Hazleton,	Total,	5	.....	8
	Native,	5	.....	6
	Foreign, .....	.....	.....	2
	Unstated, .....	.....	.....	.....
Homestead,	Total,	11	.....	7
	Native,	4	.....	5
	Foreign,	7	.....	2
	Unstated, .....	.....	.....	.....
Huntingdon,	Total,	1	.....	5
	Native,	1	.....	5
	Foreign, .....	.....	.....	.....
	Unstated, .....	.....	.....	.....
Indiana,	Total, .....	.....	.....	3
	Native, .....	.....	.....	3
	Foreign, .....	.....	.....	.....
	Unstated, .....	.....	.....	.....
Jeannette,	Total,	2	.....	.....
	Native,	1	.....	.....
	Foreign,	1	.....	.....
	Unstated, .....	.....	.....	.....
Jersey Shore,	Total,	2	.....	1
	Native,	2	.....	1
	Foreign, .....	.....	.....	.....
	Unstated, .....	.....	.....	.....

TABLE 4—Continued.

Area.	Nativity.	Twins.	Triplets.	Illegitimates.
Johnstown,	Total,.....	22	2	39
	Native,.....	12	1	34
	Foreign,.....	10	1	5
	Unstated,.....			
Juniata,	Total,.....	1		3
	Native,.....	1		3
	Foreign,.....			
	Unstated,.....			
Kane,	Total,.....	3		2
	Native,.....			2
	Foreign,.....	3		
	Unstated,.....			
Kingston,	Total,.....			
	Native,.....			
	Foreign,.....			
	Unstated,.....			
Knoxville,	Total,.....	3		
	Native,.....	2		
	Foreign,.....	1		
	Unstated,.....			
Lancaster,	Total,.....	12		26
	Native,.....	11		25
	Foreign,.....	1		1
	Unstated,.....			
Lansford,	Total,.....	3		2
	Native,.....	2		2
	Foreign,.....	1		
	Unstated,.....			
Larksville,	Total,.....	7		
	Native,.....	5		
	Foreign,.....	2		
	Unstated,.....			
Latrobe,	Total,.....	3		4
	Native,.....	2		3
	Foreign,.....	1		1
	Unstated,.....			
Lebanon,	Total,.....	6		5
	Native,.....	5		5
	Foreign,.....	1		
	Unstated,.....			
Lehighton,	Total,.....	3		
	Native,.....	2		
	Foreign,.....	1		
	Unstated,.....			
Lewistown,	Total,.....	5		7
	Native,.....	5		7
	Foreign,.....			
	Unstated,.....			
Lock Haven,	Total,.....	2		8
	Native,.....	1		8
	Foreign,.....	1		
	Unstated,.....			
Luzerne,	Total,.....	1		5
	Native,.....	1		5
	Foreign,.....			
	Unstated,.....			
McKeesport,	Total,.....	16	1	10
	Native,.....	4		7
	Foreign,.....	12	1	3
	Unstated,.....			
McKees Rocks,	Total,.....	10		3
	Native,.....	3		2
	Foreign,.....	7		1
	Unstated,.....			
Mahanoy City,	Total,.....	5		3
	Native,.....	2		3
	Foreign,.....	3		
	Unstated,.....			

TABLE 4—Continued.

Area.	Nativity.	Twins.	Triplets.	Illegit- imates.
Meadville,	Total,	3	.....	3
	Native,	2	.....	3
	Foreign,	1	.....	.....
	Unstated, .....	.....	.....	.....
Middletown,	Total, .....	.....	.....	5
	Native, .....	.....	.....	5
	Foreign, .....	.....	.....	.....
	Unstated, .....	.....	.....	.....
Monessen,	Total,	6	.....	5
	Native,	1	.....	4
	Foreign,	5	.....	1
	Unstated, .....	.....	.....	.....
Millvale,	Total,	2	.....	1
	Native, .....	.....	.....	1
	Foreign,	2	.....	.....
	Unstated, .....	.....	.....	.....
Milton,	Total,	12	.....	5
	Native,	12	.....	5
	Foreign, .....	.....	.....	.....
	Unstated, .....	.....	.....	.....
Minersville,	Total,	4	.....	1
	Native,	1	.....	1
	Foreign,	3	.....	.....
	Unstated, .....	.....	.....	.....
Monongahela,	Total,	3	.....	2
	Native,	2	.....	1
	Foreign,	1	.....	1
	Unstated, .....	.....	.....	.....
Mount Carmel,	Total,	5	.....	12
	Native,	5	.....	8
	Foreign, .....	.....	.....	4
	Unstated, .....	.....	.....	.....
Mount Pleasant,	Total,	2	.....	3
	Native,	1	.....	3
	Foreign,	1	.....	.....
	Unstated, .....	.....	.....	.....
Munhall,	Total,	2	.....	.....
	Native,	1	.....	.....
	Foreign,	1	.....	.....
	Unstated, .....	.....	.....	.....
Nanticoke,	Total,	5	.....	4
	Native,	1	.....	4
	Foreign,	4	.....	.....
	Unstated, .....	.....	.....	.....
New Brighton,	Total,	4	.....	.....
	Native,	3	.....	.....
	Foreign,	1	.....	.....
	Unstated, .....	.....	.....	.....
New Castle,	Total,	13	.....	7
	Native,	9	.....	5
	Foreign,	4	.....	2
	Unstated, .....	.....	.....	.....
New Kensington,	Total,	4	.....	3
	Native,	1	.....	2
	Foreign,	3	.....	1
	Unstated, .....	.....	.....	.....
Norristown,	Total,	6	.....	11
	Native,	2	.....	11
	Foreign,	4	.....	.....
	Unstated, .....	.....	.....	.....
North Braddock,	Total,	5	2	1
	Native,	2	1	1
	Foreign,	3	1	.....
	Unstated, .....	.....	.....	.....
Northampton,	Total,	6	.....	7
	Native,	1	.....	5
	Foreign,	5	.....	2
	Unstated, .....	.....	.....	.....

TABLE 4—Continued.

Area.	Nativity.	Twins.	Triplets.	Illegit- imates.
Oil City,	Total,	2	.....	7
	Native,	2	.....	2
	Foreign,	2	.....	3
	Unstated, .....	.....	.....	2
Old Forge,	Total,	4	.....	2
	Native,	2	.....	2
	Foreign,	2	.....	.....
	Unstated, .....	.....	.....	.....
Olyphant,	Total,	3	.....	1
	Native,	1	.....	1
	Foreign,	2	.....	.....
	Unstated, .....	.....	.....	.....
Philadelphia,	Total,	391	3	1,083
	Native,	217	1	914
	Foreign,	174	2	169
	Unstated, .....	.....	.....	5
Phoenixville,	Total,	3	.....	3
	Native,	2	.....	2
	Foreign,	1	.....	1
	Unstated, .....	.....	.....	.....
Pittsburgh,	Total,	168	4	567
	Native,	72	2	453
	Foreign,	96	2	109
	Unstated, .....	.....	.....	5
Pittston,	Total,	4	.....	5
	Native,	3	.....	4
	Foreign,	1	.....	1
	Unstated, .....	.....	.....	.....
Plymouth,	Total,	4	.....	4
	Native,	2	.....	3
	Foreign,	2	.....	1
	Unstated, .....	.....	.....	.....
Pottsville,	Total,	5	.....	16
	Native,	3	.....	15
	Foreign,	2	.....	1
	Unstated, .....	.....	.....	.....
Pottstown,	Total,	6	.....	16
	Native,	5	.....	16
	Foreign,	1	.....	.....
	Unstated, .....	.....	.....	.....
Punxsutawney,	Total,	2	.....	2
	Native,	2	.....	2
	Foreign, .....	.....	.....	.....
	Unstated, .....	.....	.....	.....
Rankin,	Total,	3	.....	3
	Native, .....	.....	.....	.....
	Foreign,	3	.....	3
	Unstated, .....	.....	.....	.....
Reading,	Total,	21	.....	69
	Native,	15	.....	63
	Foreign,	6	.....	6
	Unstated, .....	.....	.....	.....
Rochester,	Total,	2	.....	3
	Native,	2	.....	3
	Foreign, .....	.....	.....	.....
	Unstated, .....	.....	.....	.....
Ridgway,	Total, .....	.....	.....	2
	Native, .....	.....	.....	2
	Foreign, .....	.....	.....	.....
	Unstated, .....	.....	.....	.....
St. Clair, Allegheny county,	Total,	6	.....	2
	Native,	3	.....	2
	Foreign,	3	.....	.....
	Unstated, .....	.....	.....	.....
St. Marys,	Total,	1	.....	7
	Native, .....	.....	.....	6
	Foreign,	1	.....	1
	Unstated, .....	.....	.....	.....

TABLE 4 - Continued.

Area.	Nativity.	Twins.	Triplets.	Illegitimates.
Sayre,	Total,.....	3	.....	10
	Native,.....	2	.....	9
	Foreign,.....	1	.....	1
	Unstated,.....	.....	.....	.....
Seranton,	Total,.....	45	2	49
	Native,.....	29	.....	35
	Foreign,.....	16	2	14
	Unstated,.....	.....	.....	.....
Scottdale,	Total,.....	2	.....	2
	Native,.....	2	.....	2
	Foreign,.....	.....	.....	.....
	Unstated,.....	.....	.....	.....
St. Clair, Schuylkill county,	Total,.....	4	.....	2
	Native,.....	1	.....	1
	Foreign,.....	3	.....	1
	Unstated,.....	.....	.....	.....
Shanekin,	Total,.....	5	1	19
	Native,.....	5	1	18
	Foreign,.....	.....	.....	1
	Unstated,.....	.....	.....	.....
Sharon,	Total,.....	2	.....	6
	Native,.....	.....	.....	5
	Foreign,.....	2	.....	1
	Unstated,.....	.....	.....	.....
Sharpsburg,	Total,.....	3	.....	1
	Native,.....	2	.....	.....
	Foreign,.....	1	.....	1
	Unstated,.....	.....	.....	.....
Shenandoah,	Total,.....	10	.....	7
	Native,.....	3	.....	5
	Foreign,.....	7	.....	2
	Unstated,.....	.....	.....	.....
South Bethlehem,	Total,.....	9	.....	24
	Native,.....	5	.....	8
	Foreign,.....	4	.....	16
	Unstated,.....	.....	.....	.....
Steelton,	Total,.....	11	.....	21
	Native,.....	4	.....	19
	Foreign,.....	7	.....	2
	Unstated,.....	.....	.....	.....
Sunbury,	Total,.....	2	.....	12
	Native,.....	2	.....	12
	Foreign,.....	.....	.....	.....
	Unstated,.....	.....	.....	.....
Swissvale,	Total,.....	2	.....	1
	Native,.....	2	.....	.....
	Foreign,.....	.....	.....	1
	Unstated,.....	.....	.....	.....
Swoyersville,	Total,.....	5	.....	1
	Native,.....	1	.....	1
	Foreign,.....	4	.....	.....
	Unstated,.....	.....	.....	.....
South Sharon,	Total,.....	1	.....	1
	Native,.....	.....	.....	.....
	Foreign,.....	1	.....	1
	Unstated,.....	.....	.....	.....
Tamaqua,	Total,.....	1	.....	8
	Native,.....	1	.....	8
	Foreign,.....	.....	.....	.....
	Unstated,.....	.....	.....	.....
Tarentum,	Total,.....	7	.....	1
	Native,.....	3	.....	1
	Foreign,.....	4	.....	.....
	Unstated,.....	.....	.....	.....
Taylor,	Total,.....	.....	.....	2
	Native,.....	.....	.....	2
	Foreign,.....	.....	.....	.....
	Unstated,.....	.....	.....	.....

TABLE 4—Continued.

Area.	Nativity.	Twins.	Triplets.	Illegitimates.
Throop,	Total, .....	.....	.....	2
	Native, .....	.....	.....	1
	Foreign, .....	.....	.....	1
	Unstated, .....	.....	.....	.....
Titusville,	Total, .....	.....	.....	3
	Native, .....	.....	.....	3
	Foreign, .....	.....	.....	.....
	Unstated, .....	.....	.....	.....
Tyrone,	Total,	4	.....	8
	Native,	3	.....	8
	Foreign,	1	.....	.....
	Unstated, .....	.....	.....	.....
Uniontown,	Total,	2	.....	12
	Native,	2	.....	11
	Foreign, .....	.....	.....	1
	Unstated, .....	.....	.....	.....
Warren,	Total,	7	.....	4
	Native,	3	.....	4
	Foreign,	4	.....	.....
	Unstated, .....	.....	.....	.....
Washington,	Total,	8	.....	12
	Native,	5	.....	12
	Foreign,	3	.....	.....
	Unstated, .....	.....	.....	.....
Waynesboro,	Total,	1	.....	4
	Native,	1	.....	4
	Foreign, .....	.....	.....	.....
	Unstated, .....	.....	.....	.....
West Berwick,	Total,	4	.....	2
	Native,	2	.....	1
	Foreign,	2	.....	1
	Unstated, .....	.....	.....	.....
West Chester,	Total,	1	.....	17
	Native,	1	.....	16
	Foreign, .....	.....	.....	.....
	Unstated, .....	.....	.....	1
West Pittston,	Total,	1	.....	.....
	Native,	1	.....	.....
	Foreign, .....	.....	.....	.....
	Unstated, .....	.....	.....	.....
Wilkes-Barre,§.....	Total,	16	.....	35
	Native,	9	.....	29
	Foreign,	7	.....	5
	Unstated, .....	.....	.....	1
Wilkesburg,	Total,	8	.....	5
	Native,	5	.....	4
	Foreign,	3	.....	1
	Unstated, .....	.....	.....	.....
Williamsport,	Total,	9	.....	38
	Native,	8	.....	38
	Foreign,	1	.....	.....
	Unstated, .....	.....	.....	.....
Wilmerding,	Total,	3	.....	.....
	Native,	1	.....	.....
	Foreign,	2	.....	.....
	Unstated, .....	.....	.....	.....
Windber,	Total,	4	.....	5
	Native,	1	.....	3
	Foreign,	3	.....	2
	Unstated, .....	.....	.....	.....
Winton,	Total,	6	.....	.....
	Native,	1	.....	.....
	Foreign,	5	.....	.....
	Unstated, .....	.....	.....	.....
York,	Total,	15	.....	30
	Native,	15	.....	30
	Foreign, .....	.....	.....	.....
	Unstated, .....	.....	.....	.....

TABLE 4—Continued.

Area.	Nativity.	Twins.	Triplets.	Illegit- imates.
Counties—Rural.				
Adams,	Total,	4	.....	8
	Native,	4	.....	8
	Foreign, .....	.....	.....	.....
	Unstated, .....	.....	.....	.....
Allegheny,	Total,	85	.....	57
	Native,	53	.....	41
	Foreign,	32	.....	16
	Unstated, .....	.....	.....	.....
Armstrong,	Total,	11	.....	27
	Native,	9	.....	26
	Foreign,	2	.....	1
	Unstated, .....	.....	.....	.....
Beaver,	Total,	5	.....	8
	Native,	3	.....	8
	Foreign,	2	.....	.....
	Unstated, .....	.....	.....	.....
Bedford,	Total,	9	.....	21
	Native,	7	.....	21
	Foreign,	1	.....	.....
	Unstated,	1	.....	.....
Blair,	Total,	17	.....	18
	Native,	16	.....	17
	Foreign,	1	.....	1
	Unstated, .....	.....	.....	.....
Bradford,	Total,	7	1	12
	Native,	4	.....	12
	Foreign,	3	1	.....
	Unstated, .....	.....	.....	.....
Berks,	Total,	18	.....	58
	Native,	16	.....	58
	Foreign,	2	.....	.....
	Unstated, .....	.....	.....	.....
Bucks,	Total,	5	.....	15
	Native,	5	.....	15
	Foreign, .....	.....	.....	.....
	Unstated, .....	.....	.....	.....
Butler,	Total,	13	1	16
	Native,	9	1	15
	Foreign,	4	.....	1
	Unstated, .....	.....	.....	.....
Cambria,	Total,	21	.....	40
	Native,	13	.....	37
	Foreign,	8	.....	3
	Unstated, .....	.....	.....	.....
Cameron,	Total, .....	.....	.....	1
	Native, .....	.....	.....	.....
	Foreign, .....	.....	.....	1
	Unstated, .....	.....	.....	.....
Carbon,	Total,	14	.....	21
	Native,	3	.....	17
	Foreign,	11	.....	4
	Unstated, .....	.....	.....	.....
Centre,	Total,	9	.....	26
	Native,	6	.....	24
	Foreign,	3	.....	2
	Unstated, .....	.....	.....	.....
Chester,	Total,	12	.....	47
	Native,	11	.....	45
	Foreign,	1	.....	.....
	Unstated, .....	.....	.....	2
Clarion,	Total,	9	.....	12
	Native,	9	.....	12
	Foreign, .....	.....	.....	.....
	Unstated, .....	.....	.....	.....
Clearfield,	Total,	20	1	52
	Native,	14	1	43
	Foreign,	6	.....	9
	Unstated, .....	.....	.....	.....

TABLE 4—Continued.

Area.	Nativity.	Twins.	Triplets.	Illegitimates.
Clinton,	Total,	4	.....	10
	Native,	4	.....	10
	Foreign, .....	.....	.....	.....
	Unstated, .....	.....	.....	.....
Columbia,	Total,	11	.....	13
	Native,	11	.....	12
	Foreign, .....	.....	.....	1
	Unstated, .....	.....	.....	.....
Crawford,	Total,	5	1	9
	Native,	5	1	9
	Foreign, .....	.....	.....	.....
	Unstated, .....	.....	.....	.....
Cumberland,	Total,	2	.....	15
	Native,	2	.....	15
	Foreign, .....	.....	.....	.....
	Unstated, .....	.....	.....	.....
Dauphin,	Total,	12	1	24
	Native,	9	1	23
	Foreign,	3	.....	1
	Unstated, .....	.....	.....	.....
Delaware,	Total,	5	.....	25
	Native,	4	.....	23
	Foreign,	1	.....	2
	Unstated, .....	.....	.....	.....
Elk,	Total,	9	.....	2
	Native,	6	.....	2
	Foreign,	2	.....	.....
	Unstated, .....	.....	.....	.....
Erie,	Total,	5	.....	6
	Native,	5	.....	6
	Foreign, .....	.....	.....	.....
	Unstated, .....	.....	.....	.....
Fayette,	Total,	39	.....	67
	Native,	23	.....	62
	Foreign,	16	.....	5
	Unstated, .....	.....	.....	.....
Forest,	Total,	4	.....	6
	Native,	4	.....	6
	Foreign, .....	.....	.....	.....
	Unstated, .....	.....	.....	.....
Franklin,	Total,	6	.....	30
	Native,	6	.....	29
	Foreign, .....	.....	.....	1
	Unstated, .....	.....	.....	.....
Fulton,	Total,	5	.....	11
	Native,	5	.....	11
	Foreign, .....	.....	.....	.....
	Unstated, .....	.....	.....	.....
Greene,	Total,	1	1	8
	Native,	1	1	8
	Foreign, .....	.....	.....	.....
	Unstated, .....	.....	.....	.....
Huntingdon,	Total,	4	1	24
	Native,	4	1	23
	Foreign, .....	.....	.....	1
	Unstated, .....	.....	.....	.....
Indiana,	Total,	13	.....	34
	Native,	4	.....	23
	Foreign,	9	.....	1
	Unstated, .....	.....	.....	.....
Jefferson,	Total,	16	1	19
	Native,	9	1	17
	Foreign,	7	.....	1
	Unstated, .....	.....	.....	1
Juniata,	Total,	5	.....	7
	Native,	5	.....	7
	Foreign, .....	.....	.....	.....
	Unstated, .....	.....	.....	.....

TABLE 4—Continued.

Area.	Nativity.	Twins	Triplets.	Illegit- imates.
Lackawanna,	Total,.....	9	.....	4
	Native,.....	4	.....	3
	Foreign,.....	5	.....	1
	Unstated,.....	.....	.....	.....
Lancaster,	Total,.....	28	1	41
	Native,.....	26	1	41
	Foreign,.....	1	.....	.....
	Unstated,.....	1	.....	.....
Lawrence,	Total,.....	12	.....	9
	Native,.....	7	.....	7
	Foreign,.....	5	.....	2
	Unstated,.....	.....	.....	.....
Lebanon,	Total,.....	10	.....	23
	Native,.....	9	.....	22
	Foreign,.....	1	.....	1
	Unstated,.....	.....	.....	.....
Lehigh,	Total,.....	12	.....	33
	Native,.....	7	.....	28
	Foreign,.....	4	.....	3
	Unstated,.....	1	.....	2
Luzerne,	Total,.....	27	.....	22
	Native,.....	12	.....	13
	Foreign,.....	15	.....	9
	Unstated,.....	.....	.....	.....
Lycoming,	Total,.....	10	.....	17
	Native,.....	8	.....	17
	Foreign,.....	2	.....	.....
	Unstated,.....	.....	.....	.....
McKean,	Total,.....	3	.....	8
	Native,.....	1	.....	6
	Foreign,.....	2	.....	2
	Unstated,.....	.....	.....	.....
Mercer,	Total,.....	13	.....	16
	Native,.....	12	.....	16
	Foreign,.....	1	.....	.....
	Unstated,.....	.....	.....	.....
Mifflin,	Total,.....	5	.....	22
	Native,.....	4	.....	22
	Foreign,.....	1	.....	.....
	Unstated,.....	.....	.....	.....
Monroe,	Total,.....	.....	.....	20
	Native,.....	.....	.....	20
	Foreign,.....	.....	.....	.....
	Unstated,.....	.....	.....	.....
Montgomery,	Total,.....	18	.....	26
	Native,.....	14	.....	23
	Foreign,.....	4	.....	3
	Unstated,.....	.....	.....	.....
Montour,	Total,.....	1	.....	2
	Native,.....	1	.....	2
	Foreign,.....	.....	.....	.....
	Unstated,.....	.....	.....	.....
Northampton,	Total,.....	13	.....	24
	Native,.....	10	.....	24
	Foreign,.....	3	.....	.....
	Unstated,.....	.....	.....	.....
Northumberland,	Total,.....	17	1	33
	Native,.....	11	.....	27
	Foreign,.....	6	1	6
	Unstated,.....	.....	.....	.....
Perry,	Total,.....	3	.....	12
	Native,.....	3	.....	12
	Foreign,.....	.....	.....	.....
	Unstated,.....	.....	.....	.....
Pike,	Total,.....	2	.....	.....
	Native,.....	2	.....	.....
	Foreign,.....	.....	.....	.....
	Unstated,.....	.....	.....	.....

TABLE 4—Continued.

Area.	Nativity.	Tw'ns.	Triplets.	Illegit- imates.
Potter,	Total,	6	.....	2
	Native,	4	.....	2
	Foreign,	2	.....	.....
	Unstated, .....	.....	.....	.....
Schuylkill,	Total,	27	.....	38
	Native,	17	.....	36
	Foreign,	10	.....	2
	Unstated, .....	.....	.....	.....
Snyder,	Total,	4	.....	6
	Native,	4	.....	6
	Foreign, .....	.....	.....	.....
	Unstated, .....	.....	.....	.....
Somerset,	Total,	11	.....	23
	Native,	11	.....	22
	Foreign, .....	.....	.....	1
	Unstated, .....	.....	.....	.....
Sullivan,	Total,	3	.....	3
	Native,	1	.....	3
	Foreign,	2	.....	.....
	Unstated, .....	.....	.....	.....
Susquehanna,	Total,	3	.....	9
	Native,	3	.....	9
	Foreign, .....	.....	.....	.....
	Unstated, .....	.....	.....	.....
Tioga,	Total,	2	.....	4
	Native,	1	.....	4
	Foreign,	1	.....	.....
	Unstated, .....	.....	.....	.....
Union,	Total,	2	.....	8
	Native,	2	.....	8
	Foreign, .....	.....	.....	.....
	Unstated, .....	.....	.....	.....
Venango,	Total,	2	.....	16
	Native,	2	.....	16
	Foreign, .....	.....	.....	.....
	Unstated, .....	.....	.....	.....
Warren,	Total,	6	.....	9
	Native,	2	.....	6
	Foreign,	4	.....	2
	Unstated, .....	.....	.....	1
Washington,	Total,	22	.....	34
	Native,	8	.....	30
	Foreign,	14	.....	4
	Unstated, .....	.....	.....	.....
Wayne,	Total,	2	.....	9
	Native,	2	.....	8
	Foreign, .....	.....	.....	1
	Unstated, .....	.....	.....	.....
Westmoreland,	Total,	46	.....	46
	Native,	24	.....	38
	Foreign,	22	.....	8
	Unstated, .....	.....	.....	.....
Wyoming,	Total, .....	.....	.....	3
	Native, .....	.....	.....	2
	Foreign, .....	.....	.....	1
	Unstated, .....	.....	.....	.....
York,	Total,	22	.....	51
	Native,	22	.....	51
	Foreign, .....	.....	.....	.....
	Unstated, .....	.....	.....	.....

Sub-Division of Morbidity Statistics.

IN CHARGE OF

WILMER R. BATT, M. D., *State Registrar.*



COMMUNICABLE DISEASES.

A total of 122,723 cases of communicable diseases were reported during the year, a decrease of 19,016 as compared with 1910. Diphtheria decreased 29,979, scarlet fever 2,599, typhoid fever 2,032, and whooping cough increased 2,539.

The case rate mortality of the principal diseases will be found under mortality statistics.

MORBIDITY TABLE 1.

Total Cases of Communicable Diseases Reported during the years 1906-1911, Inclusive.

	1906.	1907.	1908.	1909.	1910.	1911.
Total,	88,320	70,864	113,826	119,903	141,739	122,723
Actinomycosis,	1	2	.....	3	.....	.....
Anterior Poliomyelitis, .....	.....	.....	.....	.....	1,112	177
Anthrax,	23	26	19	16	19	7
Bubonic plague, .....	.....	.....	.....	.....	.....	.....
Cerebro-spinal meningitis,	361	439	215	130	149	133
Chicken pox,	2,999	3,442	5,640	8,341	6,545	8,934
Cholera (Asiatic), .....	.....	.....	.....	.....	.....	.....
Diphtheria,	10,870	10,510	12,509	13,153	14,061	16,096
Epidemic dysentery,	5	3	.....	12	19	239
Erysipelas,	1,010	972	1,095	1,473	1,627	1,668
German measles,	404	100	477	1,145	1,695	409
Glanders, .....	.....	.....	1	1	.....	2
Leprosy, .....	.....	.....	1	1	.....	3
Malarial fever,	99	81	87	88	69	69
Measles,	23,729	11,776	37,981	34,925	49,786	33,807
Mumps,	1,337	1,115	2,548	3,829	6,775	5,255
Pellagra, .....	.....	.....	.....	.....	.....	8
Pneumonia (true),	6,169	5,282	6,285	7,148	7,975	6,336
Paraperal fever,	77	57	97	69	92	80
Rabies,	8	5	8	8	12	6
Relapsing fever, .....	.....	.....	.....	.....	.....	.....
Scarlet fever,	7,679	7,639	14,413	15,536	12,981	10,382
Smallpox,	73	62	77	45	168	159
Tetanus,	65	74	85	98	116	77
Trachoma,	23	26	74	77	321	95
Trichiniasis,	1	.....	2	.....	3	6
Tuberculosis,	5,234	6,109	10,418	14,646	14,572	14,535
Typhoid fever,	24,471	20,080	15,157	11,842	13,835	11,803
Typhus fever, .....	.....	.....	.....	.....	.....	.....
Uncinariasis, .....	.....	.....	.....	.....	.....	7
Whooping cough,	3,691	3,013	6,637	7,337	9,897	12,426
Yellow fever, .....	.....	.....	.....	.....	.....	.....

MORBIDITY TABLE 2.
Communicable Diseases: Total, Urban, and Rural, by Months.

	Total.	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.
Total,	122,723	13,577	13,875	15,386	14,570	13,243	7,439	5,714	5,433	6,222	8,234	8,499	10,342
Urban,	90,551	9,922	10,405	11,307	10,780	10,020	5,899	4,278	4,146	4,463	5,292	5,177	6,381
Rural,	3,172	3,655	3,380	4,079	3,791	3,223	1,800	1,436	1,287	1,758	2,992	2,312	2,461
Anterior poliomyelitis,	177	11	15	17	10	4	9	15	20	39	22	10	14
Urban,	118	8	8	10	9	2	6	10	13	23	13	9	7
Rural,	59	3	7	7	1	2	3	5	7	1	9	1	7
Anthrax,	7	1	.....	.....	.....	.....	1	.....	.....	.....	.....	2	1
Urban,	6	1	.....	.....	.....	.....	1	.....	.....	.....	.....	2	1
Rural,	1	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Cerebro-spinal fever,	136	11	16	16	15	16	12	9	11	11	8	4	7
Urban,	91	7	12	11	12	7	11	5	8	9	3	3	2
Rural,	45	4	4	5	3	9	1	4	3	2	5	2	5
Chicken pox,	8,434	1,427	1,051	935	733	883	274	141	56	134	458	1,145	1,697
Urban,	6,468	967	773	676	562	740	230	89	37	63	295	780	1,257
Rural,	2,466	460	278	259	171	143	44	52	19	72	163	365	440
Diphtheria,	16,096	1,423	1,191	1,190	963	863	897	746	924	1,358	2,290	2,233	2,018
Urban,	12,313	1,087	953	916	739	713	718	572	700	1,067	1,661	1,704	1,513
Rural,	3,783	336	238	274	224	150	179	174	224	291	629	529	505
Epidemic dysentery,	230	.....	.....	2	.....	.....	.....	.....	174	52	1	1	.....
Urban,	221	.....	.....	.....	.....	.....	.....	.....	174	46	1	.....	.....
Rural,	9	.....	.....	2	.....	.....	.....	.....	.....	6	.....	.....	.....
Erysipelas,	1,668	207	188	241	220	284	82	48	37	32	89	106	133
Urban,	1,298	169	159	192	190	160	67	36	31	26	74	85	109
Rural,	370	38	29	49	30	124	16	12	6	6	15	21	24
German measles,	409	45	43	77	48	71	37	18	8	5	5	21	30
Urban,	207	22	14	42	15	41	20	7	5	2	4	12	20
Rural,	202	23	29	35	33	30	17	11	3	2	1	9	9

[illegible]

MORBIDITY TABLE NO. 2.—Continued.

	Total.	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.
Tuberculosis,													
Total,	11,535	1,321	1,268	1,415	1,212	1,295	1,248	1,350	1,081	1,159	1,072	1,028	1,076
Urban,	12,882	1,193	1,144	1,228	1,000	1,100	1,128	1,161	953	1,051	926	930	972
Rural,	1,649	138	124	187	152	155	120	189	128	108	146	98	104
Typhoid fever,													
Total,	11,803	881	1,173	696	528	481	454	721	1,414	1,860	1,586	1,019	990
Urban,	7,954	638	1,001	524	368	346	312	491	982	1,173	828	612	669
Rural,	3,849	243	172	162	160	135	142	230	432	687	758	407	321
Enduariatias,													
Total,	7	4	.....	.....	.....	.....	.....	.....	.....	.....	1	.....	2
Urban,	5	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Rural,	2	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Whooping cough,													
Total,	12,486	1,175	1,310	1,474	1,241	1,300	1,110	988	600	583	1,119	717	729
Urban,	7,478	712	900	949	731	833	712	714	490	589	804	551	551
Rural,	4,958	463	400	525	510	467	398	274	110	294	845	334	308

TYPHOID FEVER.

MORBIDITY TABLE 3.

Comparison of cases reported by months for the years 1906-1911, inclusive.

	1906.	1907.	1908.	1909.	1910.	Total. 1911.	Urban. 1911.	Rural. 1911.
Total,	24,471	20,080	15,157	11,842	13,835	11,803	7,954	3,849
January,	2,177	3,069	1,652	939	825	881	638	243
February,	2,286	2,206	1,204	852	614	1,173	1,001	172
March,	1,870	1,178	970	692	642	696	534	162
April,	2,122	1,126	833	475	549	528	368	160
May,	1,829	999	583	661	498	481	346	135
June,	1,198	1,045	619	515	423	454	312	142
July,	1,404	1,092	945	909	780	721	491	230
August,	2,026	1,845	1,708	1,544	1,928	1,414	982	432
September,	2,342	1,967	2,386	2,014	2,648	1,800	1,173	627
October,	2,396	2,123	1,702	1,557	2,381	1,586	828	758
November,	1,894	1,830	1,406	1,002	1,510	1,019	612	407
December,	2,927	1,566	1,144	682	1,017	990	669	321

MORBIDITY TABLE 4.

Distribution of Typhoid Fever by Age Periods, Urban and Rural, and Percentage at each age to total cases in each Locality.

	Total State.		Urban.		Rural.	
	Cases.	Per cent.	Cases.	Per cent.	Cases.	Per cent.
All ages,	11,803	100.0	7,954	100.0	3,849	100.0
Under 5 years,	557	4.7	406	5.1	151	3.9
5 to 9 years,	1,669	14.2	1,138	14.3	531	13.8
10 to 14 years,	1,565	13.2	1,031	13.0	534	13.8
15 to 19 years,	1,833	15.5	1,199	15.1	634	16.5
20 to 24 years,	1,828	15.5	1,252	15.7	576	14.9
25 to 29 years,	1,287	10.9	898	11.3	389	10.1
30 to 34 years,	902	7.6	648	8.1	254	6.6
35 to 39 years,	608	5.1	434	5.4	174	4.5
40 to 44 years,	471	4.0	313	3.9	161	4.2
45 to 49 years,	328	2.8	217	2.7	111	2.9
50 to 54 years,	207	1.7	130	1.6	77	2.0
55 to 59 years,	120	1.0	58	.7	62	1.6
60 years and over,	180	1.5	102	1.3	78	2.0
Unstated ages,	245	2.1	128	1.6	117	3.0

MORBIDITY TABLE 5.

Typhoid Fever by Nativity and Age Periods.

	Total all ages.	Under 5 years.	5-9	10-19.	20-29.	30-39.	40-49.	50-59.	60-69.	70-79.	80 and over.	Unstated.
Total,	11,803	557	1,669	3,398	3,115	1,510	802	327	151	25	4	245
Native,	9,773	506	1,514	2,962	2,330	1,178	655	280	125	25	3	195
Foreign,	1,473	39	97	284	610	265	109	29	15	....	1	24
Unstated,	557	12	58	152	175	67	38	18	11	....	....	26

MORBIDITY TABLE 6.

Typhoid Fever by Color and Age Periods.

	Total all ages.	Under 5 years.	5-9	10-19.	20-29.	30-39.	40-49.	50-59.	60-69.	70 and over.	Unstated.
Total,	11,803	557	1,669	3,398	3,115	1,510	802	327	151	30	245
White,	11,603	546	1,623	3,343	3,073	1,487	787	325	148	29	242
Black,	193	11	46	53	42	21	15	2	2	1	3
Unstated,	7	.....	.....	2	.....	2	.....	.....	1	.....	2

MORBIDITY TABLE 7.

Typhoid Fever by Sex and Color.

	All colors.	White.	Black.	Color unstated.
Total,	11,803	11,603	193	7
Males,	6,830	6,716	109	5
Females,	4,973	4,887	84	2

MORBIDITY TABLE 8.

Typhoid Fever by Nativity and Sex.

	Total.	Native.	Foreign.	Unstated.
Total,	11,803	9,773	1,473	557
Males,	6,830	5,457	1,028	345
Females,	4,973	4,316	445	212

DIPHThERIA.

MORBIDITY TABLE 9.

Comparison of cases reported by months for the years 1906-1911, inclusive.

	1906.	1907.	1908.	1909	1910.	Total. 1911.	Urban. 1911.	Rural. 1911.
Total,	10,870	10,510	12,509	13,133	14,061	16,096	12,313	3,783
January,	1,042	1,065	1,098	1,251	1,187	1,423	1,087	336
February,	885	828	952	1,167	994	1,191	953	238
March,	852	769	1,008	1,238	948	1,190	916	274
April,	702	737	670	847	1,041	963	739	224
May,	688	575	672	919	1,044	863	713	150
June,	546	553	597	849	868	897	718	179
July,	437	473	621	725	750	746	572	174
August,	461	597	580	780	857	924	700	224
September,	994	796	1,122	981	1,153	1,358	1,067	291
October,	1,589	1,283	1,857	1,380	1,681	2,290	1,661	629
November,	1,458	1,501	1,742	1,434	2,010	2,233	1,704	529
December,	1,215	1,333	1,581	1,573	1,528	2,018	1,513	505

MORBIDITY TABLE 10.

Distribution of Diphtheria by Age Periods, State, Urban, and Rural, by Percentage at each Age of Total Cases in each Locality.

Ages.	Total State.		Urban.		Rural.	
	Cases.	Per cent.	Cases.	Per cent.	Cases.	Per cent.
All ages,	16,096	100.0	12,343	100.0	3,753	100.0
Under 5 years,	5,380	33.4	4,437	35.2	1,093	27.5
5 to 9 years,	5,966	37.0	4,627	37.6	1,336	35.5
10 to 14 years,	2,119	13.0	1,548	12.5	571	15.2
15 to 19 years,	801	5.0	524	4.3	277	7.2
20 to 24 years,	551	3.4	386	3.1	165	4.4
25 to 29 years,	364	2.3	255	2.1	108	2.9
30 to 34 years,	283	1.9	216	1.7	73	1.9
35 to 39 years,	170	1.1	115	0.9	55	1.4
40 years and over,	246	1.5	161	1.3	85	2.1
Age unstated,	220	1.4	170	1.3	50	1.4

MORBIDITY TABLE 11.

Diphtheria by Nativity and Age Periods.

	Total all ages.	Under 5 years.	5-9	10-19.	20-29.	30-39.	40-49.	50-59.	60-69.	70-79.	80 and over.	Unstated.
Total,	16,096	5,380	5,963	2,120	914	453	171	54	15	5	1	220
Native,	14,627	4,836	5,541	1,688	774	400	153	45	14	4	1	171
Foreign,	1,099	446	519	169	96	43	15	4	1	1	.....	5
Unknown,	370	97	103	63	44	10	3	5	.....	.....	.....	44

MORBIDITY TABLE 12.
Diphtheria by Color and Age Periods.

	Total all ages.	Under 5 years.	5-9	10-19.	20-29.	30-39.	40-49.	50-59.	60-69.	70 and over.	Unstated.
Total,	16,096	5,380	5,963	2,920	914	452	171	54	15	6	220
White,	15,873	5,327	5,895	2,872	893	443	166	53	15	6	203
Black,	197	52	63	44	20	9	4	1	....	....	4
Unstated,	26	1	5	4	1	1	1	....	....	....	13

MORBIDITY TABLE 13.
Diphtheria by Sex and Color.

	All colors.	White.	Black.	Color unstated.
Total,	16,096	15,873	197	26
Males,	7,744	7,641	91	12
Females,	8,352	8,232	106	14

MORBIDITY TABLE 14.
Diphtheria by Nativity and Sex.

	Total.	Native.	Foreign.	Unstated.
Total,	16,096	14,627	1,099	370
Males,	7,744	7,201	349	194
Females,	8,352	7,426	750	176

SCARLET FEVER.

MORBIDITY TABLE 15.

Comparison of Cases reported by months for the years 1906-1911, inclusive.

	1906.	1907.	1908.	1909.	1910.	Total. 1911.	Urban. 1911.	Rural. 1911.
Total,	7,670	7,697	14,413	15,536	12,981	10,382	7,371	3,011
January,	879	713	1,413	1,782	1,671	1,195	838	357
February,	875	572	1,431	1,608	1,415	1,091	696	395
March,	758	676	1,590	1,853	1,521	1,180	738	442
April,	687	577	1,282	1,500	1,298	1,136	783	353
May,	707	479	1,105	1,189	1,455	1,091	809	282
June,	517	495	865	1,042	1,006	733	537	196
July,	378	379	617	776	617	407	296	111
August,	350	411	482	623	515	461	369	105
September,	425	528	967	786	613	489	392	97
October,	679	715	1,415	1,139	799	741	525	216
November,	687	1,085	1,687	1,640	1,066	878	657	221
December,	731	1,066	1,559	1,598	1,095	977	731	246

MORBIDITY TABLE 16.

Distribution of Scarlet Fever by Age Periods, State, Urban, and Rural, with the Percentage in each Age Period of Total Cases in each Locality.

	State.		Urban.		Rural.	
	Cases.	Per cent.	Cases.	Per cent.	Cases.	Per cent.
All ages,	10,382	100.0	7,371	100.0	3,011	100.0
Under 5 years,	2,990	28.8	1,228	39.3	762	25.3
5 to 9 years,	4,196	40.5	3,106	42.1	1,090	36.2
10 to 14 years,	1,779	17.1	1,159	15.7	620	20.5
15 to 19 years,	667	6.4	379	5.0	288	9.6
20 to 24 years,	391	2.9	264	3.6	97	3.2
25 to 29 years,	124	1.2	91	1.5	33	1.1
30 to 34 years,	105	1.0	66	0.9	40	1.3
35 to 39 years,	43	0.4	28	0.4	15	0.5
40 years and over,	44	0.4	24	0.3	20	0.7
Unstated age,	132	1.3	86	1.2	46	1.5

MORBIDITY TABLE 17.

Scarlet Fever by Nativity and Age Periods.

	Total all ages.	Under 5 years.	5-9	10-19.	20-29.	30-39.	40-49.	50-59.	60-69.	70 and over.	Unstated.
Total,	10,382	2,990	4,196	1,212	446	425	149	33	9	2	132
Native,	9,443	2,699	3,853	1,253	372	372	134	27	7	1	97
Foreign,	566	186	202	114	38	38	8	6	2	1	11
Unstated,	373	105	141	79	15	15	7	2	2	2	24

MORBIDITY TABLE 18.

Scarlet Fever by Color and Age Periods.

	Total all ages.	Under 5 years.	5-9	10-19.	20-29.	30-39.	40-49.	50-59.	60-69.	70 and over.	Unstated.
Total,	10,382	2,990	4,196	2,446	425	149	233	9	2	...	132
White,	10,297	2,969	4,163	2,428	420	146	233	9	2	...	127
Black,	73	20	33	17	5	3	...	...	...	...	1
Unstated,	12	1	...	1	...	1	...	...	...	...	4

MORBIDITY TABLE 19.

Scarlet Fever by Sex and Color.

	All colors.	White.	Black.	Unstated.
Total,	10,382	10,297	73	12
Males,	4,876	4,829	42	5
Females,	5,506	5,468	31	7

MORBIDITY TABLE 20.

Scarlet Fever by Nativity and Sex.

	Total.	Native.	Foreign.	Unstated.
Total,	10,382	9,443	566	373
Males,	4,876	4,421	271	184
Females,	5,506	5,022	295	189

TUBERCULOSIS.

MORBIDITY TABLE 21.

Comparison of Cases reported by months for the years 1906-1911, inclusive.

	1906.	1907.	1908.	1909.	1910.	Total. 1911.	Urban. 1911.	Rural. 1911.
Total.	5,234	6,109	10,418	14,646	14,572	14,535	12,886	1,649
January.	483	546	802	1,111	1,051	1,331	1,193	138
February.	367	530	696	1,011	1,072	1,268	1,144	124
March.	374	477	759	1,317	1,455	1,415	1,228	187
April.	370	450	756	1,299	1,512	1,212	1,060	152
May.	402	587	744	1,388	1,411	1,295	1,140	155
June.	474	477	826	1,479	1,118	1,248	1,128	120
July.	563	475	985	1,622	1,102	1,350	1,161	189
August.	486	512	552	1,375	1,282	1,081	953	128
September.	401	482	813	1,146	1,137	1,159	1,051	108
October.	499	478	991	993	1,263	1,072	926	146
November.	580	476	1,052	965	1,086	1,028	930	98
December.	435	619	1,042	907	1,080	1,076	972	104

MORBIDITY TABLE 22.

Tuberculosis Distribution by Age Periods, State, Urban, and Rural, with the Percentage at each Age of Total Cases in each Locality.

Ages.	State.		Urban.		Rural.	
	Cases.	Per cent.	Cases.	Per cent.	Cases.	Per cent.
Total at all ages.	14,535	100.0	12,886	100.0	1,649	100.0
Under 5 years.	345	2.4	300	2.3	45	2.8
5 to 9 years.	554	3.8	468	3.7	86	5.1
10 to 14 years.	680	4.7	593	4.6	87	5.1
15 to 19 years.	1,304	8.3	1,048	8.1	156	9.8
20 to 24 years.	2,009	13.8	1,765	13.7	244	14.7
25 to 29 years.	2,021	13.9	1,803	14.0	218	13.1
30 to 34 years.	1,800	12.4	1,627	12.6	173	10.5
35 to 39 years.	1,580	10.9	1,423	11.0	157	9.8
40 to 44 years.	1,163	8.0	1,032	8.1	131	7.9
45 to 49 years.	810	5.8	726	5.7	104	6.4
50 to 54 years.	626	4.4	550	4.3	76	4.6
55 to 59 years.	409	2.7	357	2.8	43	2.6
60 to 64 years.	296	2.0	262	2.0	31	1.6
65 to 69 years.	196	1.3	161	1.3	26	1.6
70 to 74 years.	89	0.6	70	0.5	19	1.1
75 and over.	50	0.3	40	0.3	10	0.6
Unstated age.	688	1.7	648	5.0	40	2.4

MORBIDITY TABLE 23.

Tuberculosis by Nativity and Age Periods.

	Total all ages.	Under 5 years.	5-9	10-19.	20-29.	30-39.	40-49.	50-59.	60-69.	70 and over.	Unstated.
Totals.	14,535	345	554	1,884	4,030	3,880	2,903	1,026	486	139	688
Native.	8,908	252	483	1,415	2,532	2,034	1,073	568	254	72	225
Foreign.	2,970	18	24	248	801	756	532	259	119	29	94
Unstated.	2,657	75	47	221	607	590	398	199	113	38	369

MORBIDITY TABLE 24.
Tuberculosis by Color and Age Periods.

	Total all ages.	Under 5 years.	5-9	10-19.	20-29.	30-39.	40-49.	50-59.	60-69.	70 and over.	Unstated.
Total,	14,535	345	554	1,884	4,030	3,350	2,003	1,026	486	139	638
White,	13,309	306	513	1,724	3,694	3,093	1,850	933	456	125	615
Black,	847	27	41	134	250	201	88	51	15	.....	40
Unstated,	379	12	.....	26	86	86	65	42	15	14	33

MORBIDITY TABLE 25.
Tuberculosis by Sex and Color.

	All colors.	White.	Black.	Color unstated.
Total,	14,535	13,309	847	379
Males,	8,235	7,543	469	223
Females,	6,300	5,766	378	156

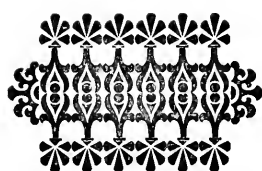
MORBIDITY TABLE 26
Tuberculosis by Nativity and Sex

	Total.	Native.	Foreign.	Unstated.
Total,	14,535	8,908	2,970	2,657
Males,	8,235	4,822	1,833	1,580
Females,	6,300	4,086	1,137	1,077

Sub-Division of Marriage Statistics,

IN CHARGE OF

WILMER R. BATT, M. D., *State Registrar.*



MARRIAGES.

62,314 marriages occurred during the year. The number of persons married per 1,000 of population was 15.9.

The rates for the years 1906 to 1911, inclusive, were as follows:

1906	1907	1908	1909	1910	1911
17.1	17.0	15.3	15.9	16.2	15.9

The average age of brides was 24.9, and of grooms 26.8 years.

MARRIAGE TABLE 1.
Marriages for the Entire State and for each County in the State by Months.

Area.	Total.	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.
Total,	62,314	4,667	5,338	3,149	4,792	4,574	8,753	4,270	4,722	5,779	5,941	6,186	4,643
Adams county,	207	19	33	26	15	14	12	7	11	20	15	18	17
Allegheny county,	9,823	757	923	397	621	855	1,422	683	750	949	877	980	610
Armstrong county,	479	35	38	24	35	23	68	41	28	49	39	58	39
Beaver county,	620	45	49	34	32	56	75	45	48	79	59	59	40
Bedford county,	228	17	15	23	15	13	26	8	14	16	31	21	29
Blairstown county,	846	70	64	35	70	47	96	57	78	89	88	88	64
Bradford county,	419	23	42	36	39	47	53	29	28	37	36	32	34
Bucks county,	1,424	112	127	79	155	102	170	100	111	139	127	142	60
Burlington county,	38	38	25	27	53	23	68	34	28	44	54	47	48
Butler county,	522	37	40	24	30	57	132	42	40	50	41	50	34
Cambria county,	1,171	98	127	46	70	98	132	77	99	98	107	125	73
Cameron county,	59	2	5	2	6	4	6	7	3	6	2	6	4
Carbon county,	504	41	39	12	43	45	64	33	36	55	44	56	38
Cattaraugus county,	37	14	15	21	18	22	33	23	22	28	20	30	27
Chester county,	639	37	53	21	53	36	74	33	36	74	74	83	52
Clarion county,	293	9	13	10	17	35	34	18	21	27	27	43	12
Cleaveland county,	703	57	52	23	51	40	100	74	41	61	57	66	60
Columbia county,	247	9	19	19	18	24	31	8	28	25	20	15	33
Crawford county,	337	19	29	18	25	34	34	30	25	25	35	32	36
Cumberland county,	528	20	23	34	48	25	72	45	40	58	60	49	54
Dauphin county,	1,228	28	32	32	19	22	27	20	29	15	17	33	20
Delaware county,	883	86	88	84	119	73	132	76	93	117	117	123	120
Elk county,	256	19	12	3	18	38	134	43	61	84	84	114	64
Erie county,	965	50	49	33	69	101	145	25	22	31	30	29	14
Franklin county,	1,180	101	99	57	81	121	150	83	84	108	96	101	70
Forest county,	48	4	.....	3	2	4	3	8	4	4	3	4	7
Franklin county,	583	29	35	26	19	15	41	3	38	36	32	47	45
Greene county,	174	14	4	9	15	4	16	2	4	6	4	2	4
Harrison county,	17	1	1	1	1	1	3	1	1	1	1	1	1
Huntingdon county,	256	13	25	14	27	10	38	17	22	17	22	28	20
Indiana county,	515	36	46	32	33	47	58	33	51	43	43	47	40

Jefferson county,	487	28	28	26	33	42	71	43	38	39	42	52	43
Junata county,	139	6	13	13	15	6	9	7	11	17	16	14	9
Lackawanna county,	2,512	214	261	78	154	176	326	207	210	240	236	263	147
Lawrence county,	1,294	88	103	113	119	83	128	74	82	103	135	138	158
Lebanon county,	683	49	51	43	55	49	92	59	65	66	68	61	78
Lehigh county,	538	44	46	46	45	38	106	37	45	33	40	39	112
Letcher county,	1,339	117	148	163	158	236	170	177	169	160	172	172	112
Luzerne county,	2,841	258	282	153	163	244	261	268	242	262	265	290	124
Lycoming county,	1,111	101	124	134	131	144	201	181	193	197	197	200	154
Mechanic county,	209	22	17	17	28	20	48	32	30	34	26	28	27
Meriden county,	466	32	18	20	28	40	67	30	22	22	40	53	40
Monroe county,	171	12	20	23	11	13	19	5	11	16	12	14	18
Montgomery county,	181	11	9	9	18	18	18	13	14	14	27	13	18
Montour county,	198	63	61	50	55	65	160	62	57	90	108	110	77
Northampton county,	131	15	15	10	10	12	9	6	6	9	13	13	11
Northumberland county,	1,129	97	113	54	110	72	134	74	74	103	87	104	107
Perry county,	955	64	90	48	65	74	116	77	65	77	88	78	83
Pike county,	144	11	11	15	12	5	15	11	8	14	13	14	15
Porter county,	39	2	2	2	1	2	8	1	2	2	3	3	4
Schenck county,	178	15	15	11	12	14	25	12	18	17	9	18	11
Schuykill county,	1,647	134	155	57	93	130	193	113	130	155	200	172	111
Snyder county,	117	8	12	6	7	6	12	12	12	15	15	13	15
Somerset county,	43	47	31	31	27	30	59	34	33	46	60	57	42
Sullivan county,	276	1	1	12	16	18	35	9	8	12	8	5	7
Tusquehanna county,	273	17	17	12	15	23	35	15	15	25	35	23	27
Union county,	131	25	15	22	16	16	35	15	20	22	21	19	31
Venango county,	131	12	10	8	9	7	7	4	4	9	13	14	14
Warren county,	451	22	42	18	40	30	70	29	33	54	35	42	33
Washington county,	286	15	17	18	27	32	30	18	12	30	34	30	23
Wayne county,	977	81	82	44	59	93	120	95	72	88	75	89	79
Westmoreland county,	179	6	15	8	15	12	8	8	21	15	19	14	19
Wyoming county,	1,616	129	149	95	109	144	162	119	150	154	172	151	91
York county,	1,049	2	5	12	8	6	104	5	10	10	13	11	14
Philadelphia,	13,544	1,017	1,156	608	1,217	803	2,053	840	943	1,344	1,287	1,363	1,013

MARRIAGE TABLE 2.

Number of Persons Married per 1,000 of Population by Counties for the Six-Year Period, 1906-1911, inclusive.

	1906.	1907.	1908.	1909.	1910.	1911.
Entire State,	17.1	17.0	15.3	15.9	16.2	15.9
Counties.						
Adams,	12.3	12.2	12.8	12.0	13.4	12.1
Allegheny,	20.1	22.1	17.0	19.0	20.4	19.2
Armstrong,	19.2	16.9	16.4	17.7	17.1	14.0
Beaver,	18.2	20.1	16.2	18.3	16.2	15.5
Bedford,	12.1	13.5	11.8	10.7	11.4	11.8
Blair,	20.8	21.1	15.0	16.5	15.0	15.2
Bradford,	9.0	10.6	14.6	13.4	14.0	15.5
Berks,	19.5	18.7	15.9	16.5	15.8	15.4
Bucks,	11.5	11.8	11.4	12.1	15.1	12.6
Butler,	17.5	21.2	18.5	17.3	11.2	14.2
Cambria,	22.0	22.5	16.4	16.9	17.6	13.8
Cameron,	17.3	15.6	16.4	13.0	13.0	15.3
Carbon,	16.2	15.2	18.2	13.2	18.3	18.6
Centre,	16.7	15.2	13.2	14.2	15.2	13.1
Chester,	15.1	13.8	11.8	11.4	11.0	11.4
Clarion,	13.4	12.7	14.5	13.5	12.8	12.5
Clearfield,	14.9	15.8	15.4	15.0	14.7	14.8
Clinton,	16.1	15.9	15.3	14.1	15.5	15.4
Columbia,	16.1	16.7	16.2	15.5	16.1	13.4
Crawford,	13.1	13.5	15.3	16.0	18.3	17.2
Cumberland,	14.7	15.3	14.1	11.8	12.7	10.4
Dauphin,	23.2	22.7	18.7	19.4	19.8	17.5
Delaware,	16.1	15.2	12.0	13.2	15.1	14.7
Elk,	11.4	11.1	11.4	9.9	14.3	13.8
Erie,	13.1	14.3	13.4	15.9	17.3	16.4
Fayette,	19.0	18.7	13.1	15.9	14.9	13.5
Forest,	8.0	8.7	9.9	5.7	9.7	10.0
Franklin,	13.5	13.3	12.4	11.8	12.3	12.5
Fulton,	11.2	10.5	10.0	10.8	13.2	11.4
Greene,	12.3	14.1	14.0	14.8	11.6	12.1
Huntingdon,	17.8	17.8	15.0	12.8	13.4	13.1
Indiana,	22.0	22.2	23.4	21.9	15.6	15.2
Jefferson,	14.1	13.9	13.8	12.3	15.7	15.2
Juniata,	17.9	17.7	15.0	15.0	16.7	17.0
Lackawanna,	19.2	17.3	18.4	18.4	18.2	18.0
Lancaster,	15.7	15.9	15.6	14.7	15.2	15.3
Lawrence,	16.8	16.9	15.8	17.0	20.6	19.0
Lebanon,	19.0	17.3	17.8	17.4	18.3	18.0
Lehigh,	24.4	27.2	22.1	22.6	21.7	23.0
Luzerne,	15.1	14.5	15.8	15.5	16.1	16.0
Lycoming,	14.3	13.8	14.0	16.6	15.3	16.0
McKean,	6.6	7.8	9.7	10.9	11.7	13.1
Mercer,	18.1	19.6	13.6	16.0	15.6	11.3
Millin,	27.3	20.9	15.9	15.3	15.1	11.6
Monroe,	16.7	14.4	9.3	15.6	14.7	16.0
Montgomery,	15.1	14.3	12.3	12.6	12.7	11.6
Montour,	12.7	14.0	17.6	16.7	15.4	18.0
Northampton,	18.3	19.9	17.4	17.7	16.0	17.4
Northumberland,	16.2	16.9	17.3	15.5	15.2	16.4
Perry,	11.7	15.5	12.1	11.2	11.2	12.0
Philadelphia,	17.7	17.5	14.4	15.2	16.4	17.5
Pike,	5.6	6.8	9.6	7.0	9.9	7.5
Potter,	7.4	6.0	10.2	9.8	11.1	12.1
Schuylkill,	17.0	17.9	17.4	17.1	15.3	15.7
Snyder,	18.9	17.6	16.7	13.1	14.5	14.2
Somerset,	17.8	17.8	14.8	15.6	14.2	13.8
Sullivan,	10.6	9.1	10.2	12.0	11.8	12.0
Susquehanna,	11.4	12.0	14.8	13.4	12.9	13.5
Tioga,	8.3	7.8	12.3	12.6	13.0	12.4
Union,	15.1	15.7	14.0	14.0	15.8	13.9
Venango,	16.8	16.6	15.5	16.1	14.8	15.6
Warren,	9.2	10.0	14.0	13.5	14.4	14.3
Washington,	19.6	18.0	15.5	16.4	13.6	13.1
Wayne,	10.1	9.0	11.4	15.7	14.0	12.4
Westmoreland,	17.1	16.6	14.1	15.7	14.0	13.8
Wyoming,	12.5	10.6	11.0	12.7	15.3	14.5
York,	17.8	16.0	15.1	16.1	15.6	15.2

MARRIAGE TABLE 3.

Marriages by Nativity and Ages of Brides and Grooms.

Ages.	Brides.				Grooms.			
	Total.	Native.	Foreign.	Unstated.	Total.	Native.	Foreign.	Unstated.
Total,	62,314	36,786	15,044	10,484	62,314	36,559	15,344	10,411
Under 15 years,	72	35	24	13	32	21	9	2
15 to 19 years,	9,691	5,920	1,150	2,621	5,058	3,622	919	517
20 to 24 years,	27,690	15,748	7,240	4,702	29,731	17,057	8,065	4,609
25 to 29 years,	13,438	7,885	3,867	1,686	15,296	8,451	3,946	2,899
30 to 34 years,	5,125	3,211	1,301	613	5,419	3,254	1,113	1,052
35 to 39 years,	2,691	1,738	614	339	2,882	1,784	573	526
40 to 44 years,	1,451	927	329	195	1,595	981	314	300
45 to 49 years,	913	563	223	127	902	527	194	181
50 to 54 years,	551	342	141	68	557	339	87	131
55 to 59 years,	311	196	67	48	353	221	51	81
60 to 64 years,	166	103	46	17	223	139	35	49
65 to 69 years,	101	58	23	20	138	87	16	35
70 years and over,	41	23	13	5	69	39	11	19
Unstated ages,	73	37	6	30	55	35	11	9

MARRIAGE TABLE 4.

The Percentages of Brides and Grooms in each Age Period.

	Brides.	Grooms.
Under 15 years,	0.12	0.05
15 to 19 years,	15.4	8.1
20 to 24 years,	44.5	47.7
25 to 29 years,	21.6	24.6
30 to 34 years,	8.2	8.7
35 to 39 years,	4.3	4.6
40 to 44 years,	2.3	2.6
45 to 49 years,	1.5	1.5
50 years and over,	1.9	2.2

MARRIAGE TABLE 5.

The Percentage of Marriages in each month of the year.

January,	7.5	July,	7.0
February,	8.6	August,	7.6
March,	5.1	September,	9.2
April,	7.6	October,	9.5
May,	7.3	November,	9.9
June,	13.2	December,	7.5

MARRIAGE TABLE 6.

Marriages and Re-Marriages by Ages of Brides and Grooms.

Ages.	Brides					Grooms				
	Total.	First.	Second.	Third.	Fourth.	Total.	First.	Second.	Third.	Fourth.
Total,	62,314	56,456	5,772	85	1	62,314	56,352	5,868	92	2
Under 15 years,	72	72	.....	.....	.....	32	32	.....	.....	.....
15 to 19 years,	9,691	9,671	20	.....	.....	5,058	5,052	6	.....	.....
20 to 24 years,	27,690	27,237	453	.....	.....	29,731	29,117	314	.....	.....
25 to 29 years,	13,438	9,473	963	2	.....	15,296	14,395	900	1	.....
30 to 34 years,	5,125	4,082	1,039	4	.....	5,419	4,341	1,074	4	.....
35 to 39 years,	2,691	1,655	1,022	14	.....	2,883	1,837	1,028	18	.....
40 to 44 years,	1,451	682	752	17	.....	1,595	748	830	17	.....
45 to 49 years,	913	308	598	7	.....	902	271	615	15	1
50 to 54 years,	551	115	422	14	.....	557	123	422	12	.....
55 to 59 years,	311	62	242	7	.....	353	57	289	7	.....
60 to 64 years,	166	15	144	7	.....	223	19	197	7	.....
65 to 69 years,	101	13	79	9	.....	138	8	125	8	.....
70 years and over,	41	5	31	4	1	69	3	61	1	.....
Unstated ages,	73	66	7	.....	.....	55	49	4	1	1

MARRIAGE TABLE 7.

Dissolvment of Prior Marriages by Ages of Brides and Grooms.

Ages.	Brides			Grooms		
	Total.	Death.	Divorce.	Total.	Death.	Divorce.
Total,	5,858	4,623	1,235	5,962	4,653	1,299
15 to 19 years,	20	10	10	6	2	4
20 to 24 years,	453	362	91	314	184	130
25 to 29 years,	963	640	325	901	585	316
30 to 34 years,	1,043	747	296	1,078	788	290
35 to 39 years,	1,036	806	230	1,046	806	240
40 to 44 years,	769	633	136	847	688	159
45 to 49 years,	605	518	87	631	550	81
50 to 54 years,	436	406	30	434	387	47
55 to 59 years,	249	231	18	296	274	22
60 to 64 years,	151	144	7	204	199	5
65 to 69 years,	88	85	3	130	126	4
70 years and over,	36	35	1	66	65	1
Unstated ages,	7	6	1	6	6



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